



# Helena Area Habitat for Humanity®

## VOLUNTEER CONSENT, WAIVER AND RELEASE

I understand that I or my dependent(s) work(s) as a volunteer for Helena Area Habitat for Humanity (HAHFH) may expose me (or my dependent(s)) to various risks of injury and/or contracting a virus such as COVID-19 or any other. I am aware that I may be exposed to other hazards such as a pandemic or a virus, including without limitation, volunteers with health issues, exposure to lead, asbestos, mold and other materials, which may impact health. I understand and assume these risks, and agree not to hold HAHFH, its agents, employees, or volunteers liable for any such injury and/or illness.

As a volunteer, I will adhere to the HAHFH safety standards. I understand that I must respect the privacy of HAHFH applicants, partner families, homeowners, staff, and other volunteers. I will exercise confidentiality at all times. I agree that photographs, pictures, slides, movies, and/or videos may be taken of me as a volunteer with HAHFH and grant my permission for any use to which they may be put and release any claim for compensation from HAHFH or its participating sponsors and volunteers. I also agree to be added to Habitat's online volunteer registration and scheduling system and to the mailing list for Habitat's electronic newsletter.

**No youth under age 16 are allowed on the site when construction work is being performed. All teens age 16 and 17 must be accompanied by an adult chaperone age 21 or older at all times. For every four youths age 16 or 17, there must be one adult present. Youths under age 18 may not operate power tools or work in demolition, excavation or roofing.**

This waiver is valid for one year. Please return it to the Construction Supervisor, Community Engagement Coordinator or to the Habitat office at 432 N Last Chance Gulch Ste R. If you have any questions call 406-449-4663.

|   |                  |                                   |
|---|------------------|-----------------------------------|
| _____   | _____            | _____                             |
| <b>Print Name</b>                                       | <b>Signature</b> | <b>Date</b>                       |
| _____   |                  | _____                             |
| <b>Mailing Address (Street Address, City, Zip Code)</b> |                  | <b>Group Name (If Applicable)</b> |
| _____   |                  | _____                             |
| <b>Email Address</b>                                    |                  | <b>Phone Number</b>               |

### Emergency Contact:

|                   |              |                              |
|-------------------|--------------|------------------------------|
| _____             | _____        | _____                        |
| <b>Print Name</b> | <b>Phone</b> | <b>Relation to Volunteer</b> |

**Authorization of Parent or Guardian (Complete this section only if you are the parent of the above volunteer.):**

|                   |                  |             |
|-------------------|------------------|-------------|
| _____             | _____            | _____       |
| <b>Print Name</b> | <b>Signature</b> | <b>Date</b> |