VOLUNTEER ACKNOWLEDGMENT AND RELEASE

Whereas I desire to participate as a volunteer for Volunteer Program with Perkins School for the Blind (“Perkins”) in a Volunteer Activity (“Event”).

Whereas Perkins is willing to allow me to participate in the Volunteer Event as outlined below,

I agree and acknowledge as follows:

1. Participation on a Volunteer Basis: I have voluntarily applied to participate as a volunteer in the Event. I understand that as a volunteer I will not be paid for my services. I also understand that I will not be covered by or eligible for insurance coverage (if any) provided by Perkins, its affiliates, clients, or Event sponsor(s) or partner(s), including workers’ compensation, medical, property and liability insurance. I further understand that my participation in the Event may be terminated at any time by me or by Perkins.

2. Assumption of Risk: I am aware that in participating in the Event, I may be exposed to personal injury or death or damage to my property as a result to my activities, the activities of other volunteers, or the conditions under which my volunteer services are performed. With knowledge of these risks, I agree to accept any and all risks of personal injury or death or damage to my property, and I verify this statement by consenting with my e-signature.

3. Consent: I consent to the unrestricted use by Perkins, its affiliates, clients, Event sponsor(s) or partner(s), and/or any person authorized by them of photographs, recordings, interviews, videotapes, motion pictures or similar visual or auditory recording of me created in connection with the Event.

4. Confidentiality: I understand that in the course of my volunteer service with Perkins I may learn personal and confidential information about people using or working for Perkins. Such information is to be treated as completely confidential. I agree not to disclose it to any person(s) not associated with Perkins without the prior written consent of the individual to whom such information pertains. I further understand that any unauthorized disclosure of such confidential information may be grounds for individual legal liability.

5. Release: In consideration of the opportunity to participate in the Event, I hereby agree that I, my successors, assignees, heirs, guardians and legal representatives will not make any claim against Perkins, its officers, directors, trustees, employees, volunteers, clients, affiliates, or Event sponsor(s) or partner(s), for injury, death or damage resulting from the acts or omissions of any person or entity, however caused, arising from my participation in the Event. Without limiting the generality of the foregoing, I hereby waive and release any rights, actions or cause of action resulting from personal injury to me or my death, or damage to my property, sustained in connection with my participation in the Event; provided, however, that the injury, death or damage was not caused by an act or omission that was reckless, wanton, intentional, or grossly negligent.

6. Knowing and voluntary execution: I have carefully read this Volunteer Agreement and fully understand its contents. I am aware that this is a contract between Perkins and myself and a release of liability, and I provide my e-signature of my own free will.
My e-signature signifies I agree to these terms and will abide by, adhere to and honor all of the above. (If you are under 18 years of age a parent or guardian must e-sign this document).