

VOLUNTEER RELEASE ACKNOWLEDGEMENT FORM

Volunteer understands that the scope of Volunteer’s relationship with the Derby is limited to a volunteer position and that no compensation is expected in return for services provided by Volunteer, and that Volunteer is responsible for his/her insurance coverage in the event of personal injury or illness as a result of Volunteer’s services to the Derby.

- 1. Waiver and Release. I, the Volunteer, release and forever discharge and hold harmless the Derby, its directors, officers, employees, agents, insurers, successors and assigns from any and all liability, claims, and demands of whatsoever kind or nature which arise from my service to or activities with the Derby. I understand and acknowledge that this Release discharges the Derby from any liability or claim that I may have against the Derby with respect to bodily injury, personal injury, illness, death, or property damage that may result, arise from, or occur while I am providing volunteer services to the Derby.
- 2. Insurance. Further, I understand that the Derby does not assume any responsibility for or obligation to provide me with financial or other assistance, including, but not limited to, medical, health, or disability benefits or insurance of any kind in the event of my injury, illness, death, or damage to my property. I expressly waive any such claim for compensation or liability against the Derby beyond what may be offered freely by the Derby.
- 3. Assumption of Risk. I understand that the services I provide to the Derby may include activities that are hazardous to me including, but not limited to, being around or near gravity-powered cars being driven by youth. As a volunteer, I hereby expressly assume the risk of injury or harm from these activities and release the Derby from all things occurring while I am providing volunteer services.
- 4. Photographic Release. I grant and convey to the Derby all rights, title, and interests in any and all photographs, images, video, or audio recordings of me or my likeness made by Derby or its agents in connection with my providing volunteer services to the Derby.
- 5. Other. As a volunteer, I expressly agree that this Release is intended to be as broad an inclusive as permitted by the laws of the State of Ohio. I further agree that in the event that any clause or provision of this Release is deemed invalid, the enforceability of the remaining provisions of this Release shall not be affected.
- 6. COVID-19. The ISBD has put in place preventative measures to reduce the spread of COVID-19; however, the ISBD cannot guarantee that you will not become infected with COVID-19. Further, attending any ISBD event could increase your risk of contracting COVID-19.

By signing this agreement, I acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that I (children, I, group) may be exposed to or infected by COVID-19 by attending an event that such exposure or infection may result in personal injury, illness, permanent disability, and death. I understand and agree that this release includes any claims based on the actions, omissions, or negligence of the ISBD, its employees, volunteers, participants or others, whether a COVID-19 infection occurs before, during or after participation in any ISBD sanctioned event.

Event guidelines is subject to change based on state and local guidelines.

By signing below, I express my understanding and intent to enter into this Volunteer Release Acknowledgement Form willingly and voluntarily.

Signature

Date

Printed Name