

**North Alabama Conference of the United Methodist Church  
Workgroup Participant Liability Release Form**

*(Please read before signing, as this constitutes your agreement as a volunteer and the understanding of your working relationship with North Alabama United Methodist Disaster Recovery)*

I, \_\_\_\_\_ (Full Name), acknowledge and state the following: I have chosen to travel to the work site to perform cleanup/construction work in disaster relief. I understand that this work entails a risk of physical injury and often involves hard physical labor, heavy lifting, and other strenuous activity; and that some activities may take place on ladders and building framing other than ground level. I certify that I am in good health and physically able to perform this type of work.

I understand that I am engaging in this project at my own risk. I understand that this is a "grass roots" activity to support individuals adversely affected by the disaster. I assume all risk and responsibility for any damage or injury to my property or any personal injury which I may sustain while involved in this project, and related material costs and expenses.

In the event that the North Alabama Conference of the United Methodist Church arranges accommodations, I understand that they are not responsible or liable for my personal effects and property and that they will not provide lock up or security for any items. I will hold them harmless in the event of theft or for loss resulting from any source or cause. I further understand that I am to abide by whatever rules and regulations may be in effect for the accommodations at that time.

By my signature, for myself, my estate and my heirs, I release, discharge, indemnify and forever hold the North Alabama Conference, its districts, and any local church or camp within the North Alabama Conference together with their officers, agents, servants and employees, harmless from any and all causes of action arising from my participation in this project, and travel or lodging associated therewith, including any damages which may be caused by their own negligence or misconduct.

**Printed Name** \_\_\_\_\_

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Address** \_\_\_\_\_

**Emergency Contact** \_\_\_\_\_

**Home** \_\_\_\_\_ **Cell** \_\_\_\_\_