

*D*ivine Do-Overs

Home Transformation Participant Liability and Medical Release

Please read before signing as this constitutes the agreement and the understanding of your working relationship as a participant with Long Hollow Baptists Church outreach of Divine Do-Overs – Home Transformation Missions.

I, _____ acknowledge and state the following:

I have chosen to participate and be a part of Home Transformation.

I understand that this program entails a risk of physical injury and involves hard physical labor, heavy lifting and other strenuous activities; and that some activities may take place on ladders.

I understand that I am engaging in this project at my own risk. I understand that this is a “volunteer” activity to support families in need of a organized home. I assume all risk and responsibility for any damage or injury to my property, or any personal injury and related medical costs and expenses which I may sustain while involved in this project.

I understand that Long Hollow Baptist Church and Divine Do-Overs is neither responsible nor 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 loss resulting from any source or cause.

I understand that should I not be the “owner” of property involved in the project, I will assume all liability for future claims or actions resulting from the alterations made to the said property.

By my signature, for my estate and my heirs, I release, discharge, indemnify and forever hold harmless Long Hollow Baptist Church Divine Do-Overs Home Transformation Ministry, together with its officers, agents, servants and employees, 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 negligence.

Signature _____ Date _____