

Matthew's Wish

Building Community, One Toy at a Time

Volunteer Waiver and Release Form

Name _____
Address _____
City _____ State _____ Zip _____
Phone _____ Email _____
Event Date _____ / _____ / _____

In consideration of permission granted to me, the undersigned, by MATTHEW'S WISH to participate in volunteer/participate activities affiliated with Matthew's Wish the undersigned, for myself, my Wards and assigns hereby waive, release and forever discharge Matthew's Wish, its Board of Directors, its agents, officials and employees from, and shall defend, hold harmless, and indemnify each and any of them from and against any expenses, debts, claims, demands, actions and causes of action whatsoever, including without limitation death or dismemberment or property damage which the undersigned may now or may hereafter have as a result of his/her participating as a volunteer and/or participant with Matthew's Wish.

RIGHT TO USE IMAGE. I irrevocably give, grant, and convey to Matthews Wish, its successors, agents, and assigns, without compensation to me or my Ward, the absolute right and unrestricted permission to copyright and/or publish (1) my name or the name of my Ward, (2) my image or my Ward's image or likeness on video or digital imaging, and (3) photographic pictures of me or my Ward, made through media, in connection with photos or video taken of me or my Ward for any legal purpose whatsoever, including but not limited to the promotion of Matthews Wish. I further waive any right that I or my Ward may have to inspect or approve the finished product. The video, photographs, digital images, will be the sole property of Matthews Wish.

____ CHECK IF YOU **DO NOT** WANT YOUR NAME OR YOUR WARD'S NAME OR IMAGE TO BE USED AS STATED ABOVE **AND NOTIFY** THE VOLUNTEER COORDINATOR FOR MATTHEWS WISH AND/OR A LEADER OF YOUR ORGANIZATION THAT YOU DO NOT WANT YOUR IMAGE TO BE USED.

IN WITNESS WHEREOF, I, the undersigned, declare full understanding of the term of this agreement on the date appearing after my signature.

Volunteer/Participant Signature (if under 18, Parent or Guardian Must Sign)

Date

Parent or Guardian Signature

Date