



## Volunteer Registration and Liability Waiver

**PLEASE PRINT**

Date: \_\_\_\_\_

Name: \_\_\_\_\_

Home Address: \_\_\_\_\_

Street

Apt./Suite #)

City

State

Zip Code

Telephone #: \_\_\_\_\_ Email Address: \_\_\_\_\_

Employer: \_\_\_\_\_

Corporate Name

Business Telephone #

Address

Suite #

City

State

Zip Code

Are you volunteering as part of a church, business or other group? If YES, which group?

\_\_\_\_\_  
Organization Name

Team Leader: \_\_\_\_\_

Age (if under 21) \_\_\_\_\_

In consideration of being permitted to participate in **"REBUILDING TOGETHER OF THE PALM BEACHES,"** I \_\_\_\_\_, for myself and my personal representatives, assigns, heirs, and next of kin, do HEREBY RELEASE, WAIVE, DISCHARGE AND COVENANT NOT TO SUE **"REBUILDING TOGETHER OF THE PALM BEACHES,"** its sponsoring agencies, its directors, officers, agents servants, employees, and assigns (hereafter collectively referred to as "RELEASEES") from all liability to me, my personal representatives, assigns, heirs, and next of kin for any and all loss or damage, and any claim or demands therefore, on account of injury to person or property, including injury resulting in my death, whether cause by the negligence of RELEASEES or otherwise occurring when I am participating in the **"REBUILDING TOGETHER OF THE PALM BEACHES"** campaign to be held all year and HEREBY AGREE TO INDEMNIFY AND SAVE AND HOLD HARMLESS RELEASEES from and loss, liability, damage, or cost including attorney's fees, RELEASEES may incur due to my participation in the **"REBUILDING TOGETHER OF THE PALM BEACHES"** campaign.

I EXPRESSLY AGREE that the foregoing release, waiver and indemnity is intended to be as broad and inclusive as is permitted by the laws of the State of Florida, and that if any portion thereof is held invalid, I agree that the balance shall, notwithstanding, continue in full force and effect. In the event that any portion of this release is held invalid, I further agree that any claims arising hereunder are to be submitted to arbitration under the laws of the State of Florida.

I HAVE READ AND VOLUNTARILY SIGN THIS RELEASE, WAIVER AND INDEMNITY AGREEMENT, and further agree that no oral representatives, statements, or inducements apart from the foregoing written agreements have been made.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
If under 18, Signature of Parent/Guardian

**FORM MUST BE RETURNED TO TEAM LEADER**

**Rebuilding Together of the Palm Beaches C/O Solid Waste Authority of Palm Beach County  
7501 North Jog Road • West Palm Beach, FL 33412 • (561) 697-2700 • Fax – (561) 640-3400**