



RELEASE OF LIABILITY FORM

IN CONSIDERATION of being permitted to volunteer, live in Islamic Relief (“IRUSA”) housing, use IRUSA vehicles, or otherwise participate in any way in the activities of IRUSA I, _____, for myself and on behalf of my heirs, personal representatives, successors, assigns or next of kin, hereby certify that:

1. I understand that this document is a release and a waiver of liability for the benefit of IRUSA and that I am knowingly and willingly assuming the risks and dangers to my personal safety and security, including economic loss, illness, psychological trauma, bodily injury and death, which may result from my traveling for, working or otherwise participating in IRUSA activities, or which may be caused by my own acts or omissions or the acts or omissions of IRUSA, its representatives or any third parties;
2. I accept that as a condition of my being provided housing and/or transportation by IRUSA, I waive any right I might have to claim any amount for damages or losses I might suffer, including but not limited to, medical expenses, pain and suffering or death, as a result of my living in IRUSA housing, including hotel lodging, or use of any IRUSA vehicle, including any rental vehicle;
3. I fully and voluntarily accept all responsibility for any losses, costs, and damages, including attorney fees, that I may incur as a result of my participation in IRUSA activities;
4. I RELEASE AND DISCHARGE IRUSA, ITS AFFILIATES, OFFICERS, DIRECTORS, EMPLOYEES AND REPRESENTATIVES FROM ANY AND ALL LIABILITY, CLAIMS, DEMANDS, LOSSES OR DAMAGES WHICH I OR ANY OF MY HEIRS OR ASSIGNS NOW HAVE OR LATER MAY HAVE AGAINST IRUSA OR ANY RELEASED PARTY ARISING OUT OF MY PARTICIPATION IN IRUSA ACTIVITIES; AND
5. I agree to indemnify, save, and hold harmless IRUSA, and all of its officers, directors, employees or representatives, from any litigation expenses, attorneys’ fees, loss, liability, damage, or any other cost which they may incur as a result of any claim arising from my acts or omissions.

Should I have any difficulty understanding any of the terms contained in this document, I understand that it is my responsibility to request that IRUSA explain such terms. I acknowledge that I have completely read and fully understand the terms of this document, that I have signed it freely and that I am not relying on any statements or representations or assurance of any nature by IRUSA or any person, and that I intend this document to be a complete and unconditional release of all liability to the greatest extent allowed by law. I agree that if any portion of this document is held to be invalid, the remainder of the document shall continue in full force and effect.

Volunteer Signature: _____

Name (Print): _____ Date _____

If under the age of 18:

Parent’s Signature: _____

Parent’s Name (Print): _____ Date _____