



# CALIFORNIA AGAINST SLAVERY

## Volunteer Liability Release Form

In consideration of my participation in California Against Slavery's walk-a-thon "Move to Stop Modern Day Slavery," I hereby release, indemnify, and hold harmless California Against Slavery and their respective officers, volunteers, agents, representatives, successors and assigns, and all persons conducted directly or indirectly, the activities surrounding my involvement as a PARTICIPANT and/or VOLUNTEER from any and all claims, rights, demands, actions, causes of action, expenses and damages, which I or my heirs, personal representative, successors, assigns or anyone claiming by, through or under me ever had, now have, or may have against the parties identified above arising from any injury, act or omission relating to my participation.

I am voluntarily participating in this activity with knowledge of the danger involved and hereby agree to accept any and all risks of property damage, personal injury, or death.

I understand that I am to receive no payment for services from California Against Slavery. I am not an employee. I will not be entitled to and will not receive Worker's Compensation benefits or other similar payments from California Against Slavery under the law of the State of California in the event that I am injured.

I also hereby consent that California Against Slavery can copyright, publish, use, sell or assign any and all photographic portraits or pictures, television spots, movie films, videotapes and/or sound records or any part thereof, that they may take of me during my work as a volunteer in which I may be included in whole or in part whether separate or in conjunction with, illustrative or written manner, story or news item, motion pictures, television or radio spots or for publicity, advertising or any other lawful purpose whatsoever, in conjunction with my name or in anonymity. I hereby waive any right I may have to inspect and/or approve the finished product or advertising copy that may be used in conjunction therewith or the use to which it may be applied.

I have carefully read this Release Form and fully understand its contents. I am aware that this is a release of liability and I sign of my own free will.

Date: \_\_\_\_\_ No. of Adults: \_\_\_\_\_ No. of Children: \_\_\_\_\_

Print Names of Adult  
Participants: \_\_\_\_\_

Print Names of  
Children: \_\_\_\_\_

Signature of Parent/Guardian:  
\_\_\_\_\_

Signatures of Other Adult  
Participants: \_\_\_\_\_