



SLEEP IN HEAVENLY PEACE

NO KID SLEEPS ON THE FLOOR IN OUR TOWN!

456 Madrin Street, Twin Falls ID 83301 | 844-432-BEDS (2337) | www.shpbeds.org

SLEEP IN HEAVENLY PEACE - Volunteer Release and Waiver of Liability Form

The Sleep in Heavenly Peace organization is made up primarily of volunteers donating their time in providing bunk beds and bedding for less fortunate families with children in need.

I, the Volunteer, hereby release and forever discharge and hold harmless Sleep in Heavenly Peace and its successors and assigns from any and all liability, claims, and demands of whatever kind of nature, either in law or in equity, which arise or may hereafter arise from the services I provide to Sleep in Heavenly Peace. I understand and acknowledge that this Release discharges Sleep in Heavenly Peace from any liability or claim that I may have against Sleep in Heavenly Peace with respect to bodily injury, personal injury, illness, death, or property damage that may result from the services I provide to Sleep in Heavenly Peace or occurring while I am providing volunteer services. Any and all disputes relating to items hereby mentioned or events ending in arbitration or litigation, each party shall mutually agree on a mediator and, together with mediator, shall fix the terms of the mediation of the dispute. In the event the parties are unable to agree on a mediator, each party shall select a mediator and the two mediators so chosen shall select a third mediator, who shall be the mediator for purposes of this agreement. Any litigation that may occur, each party agrees that the governing state be Idaho where all court proceedings take place.

In connection with my voluntary involvement in activities undertaken for, and / or with the participation and support of Sleep In Heavenly Peace, Inc. (SHP) and Move for Beds, I, the undersigned, hereby agree, for myself, my heirs, assigns, executors, and administrators to release and discharge Sleep In Heavenly Peace, Inc. and its nonprofit partner agencies, its officers and directors, members, partners, funders, employees, agents, and volunteers (Releases) from all claims, demands, and actions from injuries sustained to my person and / or property as a result of my involvement in such activities, whether or not resulting from negligence. I agree to release and hold Sleep In Heavenly Peace, Inc. and its Releases harmless from any cause or action, claims or suit arising there from. **I hereby attest that my attendance and involvement in such activities is voluntary, that I am participating at my own risk and that I have read the foregoing terms and conditions of this release. I understand in the case of an accident or injury that my health insurance is the primary insurance coverage.**

I hereby confirm, represent and warrant that I have never been charged with or convicted of any crime involving or relating to child abuse or neglect, child pornography, child abduction, or any other violent offense, including kidnapping, domestic violence, rape or any sexual offense, or who have ever been ordered by a court to receive psychiatric or psychological treatment in connection therewith.

I agree that I will perform activities that I am comfortable performing and will follow all instructions. I also grant full permission for Sleep In Heavenly Peace, Inc. and Move for Beds, to forever use photographs, videos, audios or quotations from me in legitimate accounts and promotion of Sleep In Heavenly Peace, Inc. activities, with or without identification of me by name, and without compensation. This includes SHP's website, Facebook, Twitter, and other social media and media sources.

SHP Photo & Video Release

I consent to and authorize the use of my image (either still or motion picture), voice, and/or likeness by Sleep In Heavenly Peace, Inc. through any media now and in the future. I understand that I will receive no compensation in connection with the use of my image, voice, and/or likeness.

Due to the nature of our builds and the amount of phones and/or cameras in use, it is not possible for SHP to prevent 100% that any photo or video will not be taken and/or shared. While we try our hardest, we cannot guarantee no photos or videos will be taken.

SLEEP IN HEAVENLY PEACE - Volunteer Release and Waiver of Liability Form (cont.)

Volunteer First & Last Name: _____

Address: _____

City, State & Zip/Postal Code: _____

Do you have minor children with you today? Yes _____ No _____

If yes, please list first and last name(s) of minor children: _____

If yes, I hereby authorize my minor child(ren) to participate according to the above requirements and hereby release and forever discharge and hold harmless SHP and its successors as explained above.

Parent/Guardian Signature: _____ Date: _____

I agree to the terms and conditions of the SHP Indemnification Release Form:

Volunteer Signature: _____ Date: _____

Would you be interested in receiving more information about SHP, upcoming events, receiving our newsletter or learn how you can become more involved? If yes, please provide your email address.

Email: _____