VOLUNTEER RELEASE AND WAIVER OF LIABILITY FORM

PLEASE READ CAREFULLY! THIS IS A LEGAL DOCUMENT THAT AFFECTS YOUR LEGAL RIGHTS!

This Release and Waiver of Liability (the "Release") executed on this ____ day of _____, 20__ on behalf of _____, (the "Volunteer"). The Volunteer releases the Mint Hill Chamber of Commerce, a non profit civic organization existing under the laws of the United States as a Section 501(c) (3) tax exempt corporation, each of its directors, officers, employees, and agents.

I, the above named Volunteer, do hereby give my consent to participation in all activities of the Mint Hill Chamber of Commerce. The Volunteer understands that the scope of the Volunteer's relationship with the Mint Hill Chamber of Commerce is limited to a volunteer position and that no compensation is expected in return for services provided by Volunteer; and that the Mint Hill Chamber of Commerce will not provide any benefits traditionally associated with employment to Volunteer. The Volunteer desires that the Volunteer engage in activities related to serving or participating in the Mint Hill Chamber of Commerce's activities as a player, participant or volunteer. The Volunteer is responsible for the Volunteer's own insurance coverage in the event of personal injury or illness as a result of participation in activities of the Mint Hill Chamber of Commerce.

1. Waiver and Release: I release and forever discharge and hold harmless the Mint Hill Chamber of Commerce and its successors and assigns from any and all liability, claims, and demands of whatever kind or nature, either in law or in equity, which arise or may hereafter arise from the activities as a Volunteer with the Mint Hill Chamber of Commerce, including claims arising out of negligence. I understand and acknowledge that this Release Discharges the Mint Hill Chamber of Commerce from any liability or claim that I may have against the Mint Hill Chamber of Commerce with respect to bodily injury, personal injury, illness, death, or property damage that may result from the services the Volunteer provided to the Mint Hill Chamber of Commerce or occurring while Volunteer is providing volunteer services.

2. Insurance: I affirm that I am covered by primary medical insurance and understand that I am responsible for my medical bills if injury occurs. Further, I understand that the Mint Hill Chamber of Commerce does not assume any responsibility for or obligation to provide the Volunteer with financial or other assistance, including but not limited to medical, health or disability benefits or insurance of any nature in the event of the Volunteer's injury, illness, death or damage to his or her property. I expressly waive any such claim for compensation

or liability on the part of the Mint Hill Chamber of Commerce beyond what may be offered freely by the Mint Hill Chamber of Commerce in the event of such injury or medical expenses incurred by the Volunteer.

3. Assumption of Risk: I hereby expressly assume the risk of injury or harm to me from these activities and Release the Mint Hill Chamber of Commerce from all liability for injury, illness, death, or property damage resulting from the services I provide as a volunteer or occurring while I am participating in events.

4. Photographic Release: I, grant and convey to the Mint Hill Chamber of Commerce all rights, title, and interests in any and all photographs, images, video or audio recordings of the Volunteer or his or her likeness or voice made by the Mint Hill Chamber of Commerce in connection with the Volunteer participating in the Mint Hill Chamber of Commerce events, including but not limited to, any royalties, proceeds, or other benefits derived from such photographs or recordings.

5. Medical Treatment: I, hereby release and forever discharge the Mint Hill Chamber of Commerce from any claim whatsoever which arises or may hereafter arise on account of any first-aid treatment or other medical services rendered in connection with an emergency during my tenure as a volunteer with the Mint Hill Chamber of Commerce. I give my consent for the Mint Hill Chamber of Commerce to provide, administer, or obtain medical treatment for me.

6. Other: I, expressly agree that this Release is intended to be as broad and inclusive as permitted by the laws of the State of North Carolina and that this Release shall be governed by and interpreted in accordance with the laws of the State of North Carolina. I agree that in the event that any clause or provision of this Release is deemed invalid, the enforceability of the remaining provisions of this Release shall not be affected.

By signing below, I, the above named Volunteer, express my understanding and intent to enter into this Release and Waiver of Liability knowingly and voluntarily.

_____ _____

Signature Date Date