Project #:	Group Name	Homeowner		
·	Rebuilding Together Arlington/Fairfax/Falls Church, Inc.			

## Rebuilding Together Arlington/Fairfax/Falls Church, Inc. 2021 VOLUNTEER'S AGREEMENT AND RELEASE FROM LIABILITY – ADULT

This Volunteer's Agreement and Release of Liability (this "Agreement and Release") is executed by the undersigned volunteer as of the date indicated below in favor of Rebuilding Together Arlington/Fairfax/Falls Church, Inc. and Rebuilding Together, Inc.

Please carefully read each section of this Agreement and Release and sign and date this Agreement and Release where indicated (or confirm your acceptance of this Agreement and Release, if it is completed electronically). Your signature below, or electronic confirmation (if this Agreement and Release is completed electronically) constitutes your irrevocable and unconditional consent to the terms hereof. Failure to sign and date this Agreement and Release or confirm electronically (if this Agreement and Release is completed electronically) will make you ineligible to participate as a volunteer.

- 1. VOLUNTARY PARTICIPATION: I acknowledge that I have voluntarily applied to participate in activities conducted by Rebuilding Together Arlington/Fairfax/Falls Church, Inc.'s ("RT-AFF") in which the homes of low-income persons, nonprofit facilities serving people in need and community spaces will be repaired or renovated by volunteers (skilled and unskilled) (the "Program"). I understand that as a volunteer I will not be paid for my services, will receive no benefits, and am responsible for my own insurance coverage in the event of personal injury or illness arising from my volunteer services. I agree to refrain from sexual harassment, consisting of, but not limited to, unwelcome sexual advances, requests for sexual favors, and other verbal or physical conduct of a sexual nature. I further agree that my participation in the Program may be terminated at any time by RT-AFF, any sponsorship group to which I may belong, or by me.
- 2. ASSUMPTION OF RISK: I am aware that by participating in the Program, I may be exposed to personal injury, illness, death or damage to my property as a result of my activities, the activities of other volunteers or the conditions under which my volunteer services are performed. I further understand and agree that by participating in the Program, that I may become exposed to viruses, infectious diseases, and potentially biological and chemical hazards unique to the specific project I am working on including, but not limited to, exposure to mold, mold spores, and chemicals used in the treatment and removal of mold and mold spores, and that exposure to mold and mold spores carries with it certain risks including, but are not limited to: allergic reactions, irritation associated with volatile organic compounds (VOCs), invasive disease, and mycotoxicosis. I acknowledge that (a) these risks are increased if I am elderly or suffer from immune system deficiencies due to disease, chemotherapy, or other causes, (b) infants are also susceptible to increased risks, and (c) I should make every effort to avoid exposing family members to contaminated clothing or tools. With knowledge of these risks, I agree to accept any and all risks of personal injury, illness, death or damage to my property related to or arising out of my participation in the Program. I further agree to comply with any applicable protocol, rule or directive (including any protocols related to infectious diseases such as the coronavirus) and assume the complete risk of any activity done (or not done) by me in violation of any applicable protocol, rule or directive.
- 3. RELEASE: In consideration of the opportunity afforded me to participate in the Program, I, on behalf of myself and my successors, assignees, heirs, guardians and legal representatives, hereby irrevocably and unconditionally (a) waive and release any and all claims for personal injury, illness, death or damage to property and any and all claims that arise on account of any first aid, treatment or service rendered to me, in each case, related to or arising out of my participation in the Program (collectively, the "Released Claims") against Rebuilding Together Arlington/Fairfax/Falls Church, Inc., Rebuilding Together, Inc., Arlington County, Fairfax County, and all of their respective officers, directors, contractors, agents and volunteers, any financial or in-kind sponsor of the Program, including governmental and non-governmental funding sources, any supplier of any materials or equipment that is used in the Program, any other volunteer or service recipient participating in the Program or any recipient of the benefits of the Program (collectively, the "Released Parties"); and (b) agree not to assert or prosecute (or assist any other person or entity in asserting or prosecuting) any Released Claim against any Released Party. I understand and agree that no Released Party assumes any responsibility for or obligation to provide financial or other assistance, including but not limited to medical, health and/or life insurance with respect to any Released Claim. Notwithstanding anything contained in this Paragraph 3 to the contrary, the release specifically excludes the act of any other volunteer and/or the homeowner which is determined to be grossly negligent or was done willfully and wantonly, and further excludes claims against manufacturers or suppliers for injury or death suffered by me as a direct cause and consequence of defectively manufactured materials, supplies, and/or equipment received from suppliers to the Program that are delivered to the site where I am participating in the Program.

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all photographs, ima	ages, video, or audio recordings of me or rolunteer services in the Program and conse	vey to RT-AFF all right, title and interest in any and my likeness or voice made by RTAFF in connection ent to RT-AFF's unrestricted use of such materials in
be interpreted as bro this Agreement and that if any clause of jurisdiction, the inva	padly and inclusively as permitted by the la Release shall be governed by the internal la per provision of this Agreement and Relea	eledge that this Agreement and Release is intended to aws of the Commonwealth of Virginia, (b) agree that aws of the Commonwealth of Virginia, and (c) agree se is held to be invalid by any court of competent not otherwise affect the remaining provisions of this
and any questions of myself and the Relea certify that I am eigh activities with RT-A	f mine have been answered. I am aware the ased Parties. I have signed this Agreemen nteen years of age or older. I agree that this	fully read and understand this Agreement and Release at this is a contract and a release of liability between t and Release voluntarily and of my own free will. It sagreement and Release governs all of my volunteer will be required to sign a new Agreement and Release
Executed in (City)	Virginia.	, on (date)
Volunteer Name	Signatur	re
Volunteer Address		
	ity State Zip code	Stree
Phone	•	
Witness	Date	Group (if any)
☐ Please add me to yo	ur e-news and announcements	
☐ I would like to be co	ontacted about volunteer opportunities d	uring the year
	Complete prior to volunteer ac	
Rebuilding	g Together-AFF, 10723 Main Stre	