

Trooper Damon C Allen Memorial Foundation  
EMERGENCY CONTACT AND RELEASE

**EMERGENCY CONTACT INFORMATION**

DATE \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Any allergies, medications, medical history or other information needed in an emergency?

\_\_\_\_\_  
\_\_\_\_\_

**RELEASE OF WAIVER OF LIABILITY**

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\_\_\_\_, by \_\_\_\_\_ (the "Volunteer") in favor of Trooper Damon C Allen Memorial Foundation, a nonprofit corporation, and its directors officers, employees, and agents.

The volunteer desires to work as a volunteer for the Trooper Damon C Allen Memorial Foundation \_\_\_\_\_ . The volunteer understands that the Activities may include \_\_\_\_\_

including physical labor, exposure to hazardous conditions, exposure to extreme heat or cold weather, or other circumstances that may result in personal injuries.

The Volunteer hereby freely, voluntarily, and without duress executes this Release under the following terms:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

1. Release and Waiver. Volunteer does hereby release and forever discharge and hold harmless [Insert name of nonprofit] and its successors and assigns from any and all liability, claims, and demands of whatever kind or nature, either in law or in equity, that arise or may hereafter arise from Volunteer's Activities with [Insert name of nonprofit].

VOLUNTEER UNDERSTANDS THAT THIS RELEASE DISCHARGES TROOPER DAMOND C ALLEN MEMORIAL FOUNDATION FROM ANY LIABILITY OR CLAIM THAT THE VOLUNTEER MAY HAVE AGAINST [INSERT NAME OF NONPROFIT] WITH RESPECT TO ANY BODILY INJURY, PERSONAL INJURY, ILLNESS, DEATH, OR PROPERTY DAMAGE THAT MAY RESULT FROM VOLUNTEER'S ACTIVITIES WITH TROOPER DAMON C ALLEN MEMORIAL FOUNDATION, WHETHER CAUSED BY THE NEGLIGENCE OF TROOPER DAMON C ALLEN MEMORIAL FOUNDATION OR ITS OFFICERS, DIRECTORS, EMPLOYEES, OR AGENTS OR OTHERWISE. VOLUNTEER ALSO UNDERSTANDS THAT TROOPER DAMON C ALLEN MEMORIAL FOUNDATION DOES NOT ASSUME ANY RESPONSIBILITY FOR OR OBLIGATION TO PROVIDE FINANCIAL ASSISTANCE OR OTHER ASSISTANCE, INCLUDING BUT NOT LIMITED TO MEDICAL, HEALTH, OR DISABILITY INSURANCE IN THE EVENT OF INJURY OR ILLNESS.

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2. Medical Treatment. Volunteer does hereby release and forever discharge Trooper Damon C Allen Memorial Foundation from any claim whatsoever which arises or may hereafter arise on account of any first aid, treatment, or service rendered in connection with the Volunteer's Activities with Trooper Damon C Allen Memorial Foundation.

3. Assumption of the Risk. The Volunteer understands that the Activities may involve work that may be hazardous to the Volunteer, including, but not limited to, \_\_\_\_\_,

\_\_\_\_\_ and transportation to and from the work sites. Volunteer hereby expressly and specifically assumes the risk of injury or harm in the Activities, and releases Trooper Damon C Allen Memorial Foundation from all liability for injury, illness, death, or property damage resulting from the Activities.

4. Insurance. The Volunteer understands that, except as otherwise agreed to by Trooper Damon C Allen Memorial Foundation in writing, Trooper Damon C Allen Memorial Foundation does not carry or maintain health, medical, or disability insurance coverage for any Volunteer. Each Volunteer is expected and encouraged to obtain his or her own medical or health insurance coverage.

5. Photographic Release. Volunteer does hereby grant and convey unto Trooper Damon C Allen Memorial Foundation all right, title, and interest in any and all photographic images and video or audio recordings made by Trooper Damon C Allen Memorial Foundation during the Volunteer's Activities with [Insert name of nonprofit], including, but not limited to, any royalties, proceeds, or other benefits derived from such photographs or recordings.

6. Other. Volunteer expressly agrees that this Release is intended to be as broad and inclusive as permitted by the laws of the State of Texas, and that this Release shall be governed by and interpreted in accordance with the laws of the State of Texas. Volunteer also agrees that in the event that any clause or provision of this Release shall be held to be invalid by any court of competent jurisdiction, the invalidity of such clause or provision shall not otherwise affect the remaining provisions of this Release which shall continue to be enforceable.

IN WITNESS WHEREOF, Volunteer has executed this Release as of the day and year first above written.

Volunteer: \_\_\_\_\_ Witness: \_\_\_\_\_