

ASIAN PACIFIC HEALTH FOUNDATION

VOLUNTEER AGREEMENT AND RELEASE FROM LIABILITY

1. This Release and Waiver of Liability executed on October 21, 2017 by

_____ releases Asian Pacific Health Foundation (APHF), a nonprofit organization existing under the laws of the State of California and each of its directors, employees, and coordinators.

2. I release, discharge, and hold harmless APHF and its directors, employees, and coordinators 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 APHF. I understand and acknowledge that this release statement discharges APHF from any liability or claim that I may have against the organization with respect to bodily or personal injury, illness, death, or property damage that may result from the services I provide or occurring while I am providing volunteer services at APHF sponsored events.
3. I hereby release and forever discharge APHF 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 APHF.
4. I understand that the services I provide to APHF may include activities that may be hazardous to me including blood sample handling, but not limited to involving inherently dangerous activities. As a volunteer, I hereby expressly assume risk of injury or harm from these activities and release APHF from all liability.
5. I understand that I must abide by all policies and procedures, including to hold as strictly confidential all medical information that I may obtain directly or indirectly concerning patients. Failure to comply with these requirements may result in my dismissal as a volunteer.
6. I agree to serve as a volunteer for Asian Pacific Health Foundation with a commitment of **one year**. Failure to meet this expectation will result in my immediate dismissal as a volunteer.
7. I agree to follow the supervision and direction of any personnel, employee, or volunteer coordinators, to whom I have been assigned to perform services, and to participate in any training required by APHF in order to perform the voluntary services.
8. I grant all right, title, and interests to APHF for usage of any and all photographs, images, video, or audio recordings of me that are acquired during my time as a volunteer with APHF.

By signing below, I express my understanding and intent to enter into this Release and Waiver of Liability willingly and voluntarily.

Signature: _____

Date: _____