



Indian Community of Kentucky – Release Form.

I/we hereby grant to Indian Community of Kentucky, its clients, successors, assigns and/or anyone acting under the authority or permission of any of them, the right to make originals where appropriate hereby agrees as follows:

1. **WAIVER AND RELEASE:** I, the Volunteer/Participant, release and forever discharge and hold harmless the above listed entities 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 services I provide. I understand and acknowledge that this Release discharges from any liability or claim that I may have with respect to bodily injury, personal injury, illness, death, or property damage that may result from the services I am providing for The Event.
2. **INSURANCE:** Further I understand that none of the above participating entities assumes any responsibility for or obligation to provide me (or my group) with financial or other assistance, including but not limited to medical, health or disability benefits or insurance of any nature in the event of my injury, illness, death or damage to my property. I expressly waive any such claim for compensation or liability on the part of the participating entities.
3. **MEDICAL TREATMENT:** I hereby Release and forever discharge the participating entities 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 Event.
4. **ASSUMPTION OF RISKS:** I understand that the services I provide to the Event may include activities that may be hazardous to me (or my group) including, but not limited to involving inherently dangerous activities. As a volunteer, I hereby expressly assume the risk of injury or harm from these activities and Release ALL participating entities from all liability for injury, illness, death, or property damage resulting from the services I provide as a volunteer or occurring while I am providing volunteer services for The Event.
5. **PHOTOGRAPHIC RELEASE:** I grant and convey to the event organizers all right, title, and interests in any and all photographs, images, video, audio in connection with my providing volunteer services for The Event.
6. **OTHER:** As a volunteer, I expressly agree that this Release is intended to be as broad and inclusive as permitted by the laws of the State of Kentucky and that this Release shall be governed by and interpreted in accordance with the laws of the State of Kentucky. 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.



I hereby release whatever rights, title or property interest I may have in the items referred to in this release as it pertains to me (or my group). I understand that I shall receive no compensation for my appearance in promotional materials or activities.

I hereby agree to hold Indian Community of Kentucky harmless and to indemnify Indian Community of Kentucky and its contractors, agents and employees, and/or anyone acting under the authority or permission of Indian Community of Kentucky, from any and all claims arising out of, or resulting from, my (or my groups) acts or statements in any of the above mentioned items.

Please make a note that a Cultural performance group leader may sign one waiver for the entire group and list all participant names below.

First Name:*

Last Name:*

I/We agree to the terms and conditions of the above form (print full names of those involved):*

Address Line 1:*

Address Line 2:

City:*

State:*

ZIP/Postal Code:*

Phone:*

If minor(s) (under 18 years of age) have parent or guardian rite their full name here:

Participant names: