

Kerr County Sheriff's Office

CERT MEMBER & VOLUNTEER PROGRAM

CERT MEMBER & VOLUNTEER PROGRAM RELEASE OF LIABILITY AND CONFIDENTIALITY AGREEMENT

I _____ the undersigned, hereby release and agree to hold harmless Kerr County Sheriff's Office, its members, affiliates, and employees of any and all liability that could possibly be incurred as a result of my negligence, intentional or unintentional, during the commission of my responsibilities as a CERT Member or volunteer for Kerr County Sheriff's Office.

I further release and hold harmless Kerr County Sheriff's Office, its members, affiliates, and employees of all liability with regard to any physical or emotional harm that I may sustain during the time I volunteer at the Kerr County Sheriff's Office, or as a result of my participation in the project as a CERT Member or volunteer, or in any other activity sanctioned by Kerr County Sheriff's Office.

By initialing each of the following I am agreeing to:

- _____ My role is as a CERT Member or Volunteer, and, as such, I will receive no financial reimbursement for services rendered.
- _____ I will bring to the attention of Kerr County Sheriffs Office staff any information or questions that arise of a legal nature.
- _____ I recognize that any and all information shared with me as part of my duties as a CERT Member or volunteer is confidential and shall not be divulged to unauthorized individuals, agencies, or organizations.
- _____ I will not copy, transcribe, record, or memorize confidential information in any manner, nor disclose or use such information for any purpose other than for the limited purpose of providing the assigned services at the Safe Haven.
- _____ I release the Kerr County Sheriffs Office from any and all liability for all loss, damages, and claims, (including attorney fees and costs), resulting from injury to the person listed below or to his or her property arising from the CERT Member program or volunteering services.
- _____ I hereby hold harmless to the Kerr County Sheriffs Office and project organizers from any and all claims, actions, or damages relating to or arising out of any activity related to volunteering for the Kerr County Sheriffs Office.

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- _____ I confirm, represent and warrant that I have never been convicted of any violent crime, child abuse, or neglect, child pornography, child abduction, kidnapping, rape or sexual offence of any kind or any other violation of law, nor have I ever been ordered by a court to receive psychiatric or psychological treatment in connection therewith,
- _____ I understand I am fully and completely responsible for all healthcare expenses incurred by me if I become injured while participation in the Kerr County CERT or Volunteer Program, and I have made arrangements to handle such expenses through insurance coverage, access to cash , or other methods
- _____ I agree to utilize my own vehicle for transportation to and from the designated area, and further agree that I will be fully responsible for any all damages or injuries sustained by myself or anyone else in my vehicle. I hereby represent and warrant that I am fully insured to operate my personal vehicle, to the extent required by law.
- _____ I assume full responsibility for any and all claims and costs (including my own) arising directly or indirectly out of activities, acts or omissions while acting as a CERT Member or volunteering with the Kerr County Sheriffs Office.
- _____ I authorize the Kerr County Sheriffs Office to use my name and give any organization involved with the Kerr County Sheriffs Office permission to photograph me, I understand that the Kerr County Sheriffs Office have permission to use my name, photographs/ videotapes, likeness, image, voice and biography in all media, publications, advertising and for publicity purposes in connection with my participation as a Kerr County Sheriff's Office CERT Member or in a Volunteer Program related activity or project unless written notice is received to the contrary.
- _____ I certify that the statements made in this volunteer release are true and correct, and have been given voluntarily. I understand that this information may be disclosed to any party, with legal and proper interest, and I release the Kerr County Sheriffs Office from any liability whatsoever for supplying such information. I understand that I will not be paid for services as a CERT Member or Volunteer.

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**CERT MEMBER & VOLUNTEER PROGRAM RELEASE OF
LIABILITY AND CONFIDENTIALITY AGREEMENT**

I have had the opportunity to read and understand the release and acknowledge that by signing the document, I am waiving certain legal rights in the event of injury. BY SIGNING BELOW, I accept and agree to the terms contained above.

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| Signature | Date |
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|--------------|------|
| Printed Name | Date |
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| Witness | Date |
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I have received a copy of the Kerr County Sheriff's Office CERT Policy and Procedure / Volunteer Handbook.

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| Signature | Date |
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