



# RELEASE OF LIABILITY

NAD OFFICE OF VOLUNTEER MINISTRIES

www.hesaidgo.org

## INSURANCE PREMIUMS: SELF-FUNDED

\_\_\_\_\_("VOLUNTEER") has accepted a temporary volunteer service assignment to the \_\_\_\_\_ (calling) Division of the General Conference of Seventh-day Adventists ("DIVISION"), a nonprofit, religious organization. This Release of Liability reflects Adventist Volunteer Services ("AVS") commitment to provide certain insurance coverage for VOLUNTEER in exchange for VOLUNTEER'S payment of insurance premiums and release of liability as stated herein.

1. Upon request to AVS and payment of applicable premiums by VOLUNTEER, AVS will provide VOLUNTEER with insurance coverage to include accident and sickness protection, personal effects and property insurance (personal effects baggage), and workers' compensation insurance coverage. VOLUNTEER shall be responsible for paying for the insurance premiums to be arranged by VOLUNTEER through AVS prior to VOLUNTEER'S departure.

The liability of the DIVISION, the General Conference of Seventh-day Adventists, the General Conference Corporation of Seventh-day Adventists, or any of their officers, directors, trustees, employees, members, agents, conference/missions/fields, subsidiaries or affiliated institutions (collectively, the "SEVENTH-DAY ADVENTIST CHURCH") shall be limited to deductibles, and co-payments for the above insurance coverage.

The undersigned VOLUNTEER, verifies he/she is legally an adult in his/her jurisdiction of residence\* and hereby signs this Release of Liability absolving the SEVENTH-DAY ADVENTIST CHURCH and any related entity from any liability arising out of any loss, injury, illness, disability, damage, or death sustained by VOLUNTEER while serving as a volunteer.

2. In consideration of AVS willingness to procure the insurance coverage described above on behalf of VOLUNTEER, VOLUNTEER agrees that the provision of such insurance coverage and the payment of benefits from the insurance coverage shall be accepted by the VOLUNTEER or VOLUNTEER'S estate as payment in full and satisfaction for all claims of any kind from illness, accident, wrongful death, and/or any other personal injury or property damage or loss claim of any kind related or unrelated to the VOLUNTEER'S service. If VOLUNTEER fails to apply for and pay for the insurance coverage described herein, the SEVENTH-DAY ADVENTIST CHURCH shall have no liability to VOLUNTEER resulting from such lack of coverage.

VOLUNTEER disclaims entitlement to any other payments or damages except as expressly stated in this Paragraph 2, and that other than the payments described herein, VOLUNTEER agrees to hold the SEVENTH-DAY ADVENTIST CHURCH and any related entities harmless from any further liability, claims of damages or any other legal or equitable action by VOLUNTEER or VOLUNTEER'S estate, heirs, devisees or assigns.

***\*If VOLUNTEER is a minor in his/her place of residence, a parent or legal guardian must sign this Agreement.***

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Parent/Guardian of Volunteer\*

\_\_\_\_\_  
Signature/Division Volunteer Coordinator

\_\_\_\_\_  
Date

\_\_\_\_\_  
Volunteer's Home Division

**When completed, return to NAD Division Volunteer Coordinator: Fax: (301) 680-5079**