

The Heather Cutler Foundation Volunteer Waiver & Release of Liability Form

Volunteer Information

Organization Name: The Heather Cutler Foundation
Volunteer Name: _____
☐ Check here if Volunteer is under age 18:
Contact Email (required): _____
Parent or Legal Guardian Email (required if Volunteer is under age 18): _____
Address: _____
Phone: _____
Emergency Contact Name: _____
Relationship to Participant: _____
Phone Number: _____

WAIVER AND RELEASE FORM

RELEASE OF LIABILITY

In return for being allowed to participate in volunteer activities and all related activities, including any activities incidental to such participation (“Volunteer Activities”), the undersigned Volunteer or Parent/Legal Guardian of Volunteer if Volunteer is under age 18 (hereafter referred to using “I,” “me,” or “my”) releases and agrees not to sue The Heather Cutler Foundation or its officers, directors, employees, sub-contractors, sponsors, agents, and affiliates from all present and future claims that may be made by me, my family, estate, heirs, or assigns for property damage, personal injury, or wrongful death arising as a result of my participation in the Volunteer Activities wherever, whenever, or however the same may occur.

I understand and agree that The Heather Cutler Foundation is not responsible for any injury or property damage arising out of the Volunteer Activities, even if caused by ordinary negligence or otherwise. I understand that participation in the Volunteer Activities involves certain risks, including but not limited to, serious injury and death. I am voluntarily participating in the Volunteer Activities with knowledge of the danger involved, and I agree to accept all risks of participation.

I also agree to indemnify and hold harmless The Heather Cutler Foundation for all claims arising out of my participation in the Volunteer Activities. I understand that this document is intended to be as broad and inclusive as permitted by the laws of Canada and agree that if any portion of this Agreement is invalid, the remainder will continue in full legal force and effect.

I acknowledge that The Heather Cutler Foundation does not carry insurance of any kind for my benefit or the benefit of the Volunteer (if under 18), my parents, guardians, trustees, heirs, executors, administrators, successors, and assigns.

I represent that, to my knowledge, I am in good health and suffer no physical impairment that would or should prevent my participation in Volunteer Activities.

Signature of Volunteer: _____
Date: _____

I am of legal age and am freely signing this agreement. I have read this form and understand that by signing it, I am giving up legal rights and remedies.

Signature of Parent/Legal Guardian if Volunteer is Under 18: _____

Date: _____

I am the parent or legal guardian of the Volunteer. I am of legal age and am freely signing this agreement. I have read this form and understand that by signing it, I am giving up legal rights and remedies.

PUBLICITY RELEASE

In return for being allowed to participate in volunteer activities and all related activities, including any activities incidental to such participation (“Volunteer Activities”), the undersigned Volunteer or Parent/Legal Guardian of Volunteer if Volunteer is under age 18 hereby grants to The Heather Cutler Foundation, and its subsidiaries, affiliates, agents, advertising or promotional agencies, and partners, and all such entities’ officers, directors, agents, employees, respective successors, and assigns (collectively, “Authorized Parties”), the absolute and irrevocable right and permission to use, publish, broadcast, and/or copyright the use of the Volunteer’s name, address, voice, photograph, and/or likeness in its current form or as retouched, digitized, cropped, altered, distorted, or modified in any way, in any media for promotional or advocacy purposes.

I further agree that anything derived from such use will be owned solely by the Authorized Parties. I understand this document is intended to be as broad and inclusive as permitted by the laws of Canada and agree that if any portion of this Agreement is invalid, the remainder will continue in full legal force and effect.

Signature of Volunteer: _____
Date: _____

I am of legal age and am freely signing this agreement. I have read this form and understand that by signing it, I am giving up legal rights and remedies.

Signature of Parent/Legal Guardian if Volunteer is Under 18: _____
Date: _____

I am the parent or legal guardian of the Volunteer. I am of legal age and am freely signing this agreement. I have read this form and understand that by signing it, I am giving up legal rights and remedies.

Additional Notes

- This form must be completed in full and signed before participation in any volunteer activities.
- If the Volunteer is under 18 years of age, the Parent or Legal Guardian must also complete and sign the form.
- Please ensure all information is accurate and up-to-date.
- For any questions or concerns regarding this waiver or your volunteer activities, contact us at:
Phone: +1 (855) 665-5137
Email: volunteer@heathercutler.ca

Thank you for your commitment to The Heather Cutler Foundation and for helping us make a difference in pancreatic cancer advocacy and care across Canada.