

LIABILITY RELEASE AND HOLD HARMLESS AGREEMENT

WELCOME HOME HAITI

301 W. North Street

Lexington, IL 61753

The undersigned (herein the "Individual") wishes to participate in the following activity:

(Date of Trip)

Welcome Home Haiti, Inc. and the undersigned agree that this activity poses a risk which includes but is not limited to, the following specific risks:

Bus/Van/Air/Taxi transportation, horseplay, recreational activity, painting, electrical, general construction, as well as similar and dissimilar risks (herein the "Risks").

For and in consideration of Welcome Home Haiti, Inc. allowing the individual to participate in the Activity, and other good and valuable consideration the receipt and sufficiency of which are hereby acknowledged, the undersigned, for himself or herself, assigns, heirs, and next of kin (herein the "Releasers"), release, waive, discharge, covenant to not hold liable and hereby hold harmless Welcome Home Haiti, Inc. and its officers, volunteers and agents (herein the "Releasees"), from all liability to the Releasers, on account of injury of all types to the Individual or death to the Individual or injury to the property of the Individual caused by the negligence of the Releasees while the Individual is participating in the Activity.

The undersigned is fully aware of the Risks and other hazards inherently in the Activity and is voluntarily participating in the Activity, and voluntarily assumes the Risks and all other risks of loss, damage, or injury that may be sustained by the Individual while participating in the Activity.

The undersigned warrants that he or she (and parents or guardians) has fully read and understands this Liability Release and Hold Harmless Agreement and voluntarily signs the same, and that no oral representations, statements, or inducements apart from the foregoing written agreement have been made to the undersigned.

CAUTION: READ BEFORE SIGNING

Date: _____ Signature of Participant: _____

Print Participants name: _____

Signature of Parent or Guardian: _____

Print Name of Parent or Guardian: _____

State of Florida

County of Hillsborough

Subscribed to and sworn to before the undersigned Notary Public this ____ day of _____, 20____

Notary Public