

TURTLE SURVIVAL ALLIANCE VOLUNTEER Agreement, Release and Waiver of Liability

In consideration of being permitted to participate in or assisting others in participating in volunteer opportunities with the Turtle Survival Alliance, and related events and/or activities, on behalf of myself, or a minor child or ward, heir; next of kin, personal representative, successor or assign;

(1) I ACKNOWLEDGE, UNDERSTAND, DECLARE AND AGREE THAT:

- (a) To the best of my knowledge, I am in Good Physical Condition and have no disease or injury that would be aggravated by participating in activities related to the Turtle Survival Alliance;
- (b) Participating or assisting others in participating may involve **RISK OF INJURY TO ME, INCLUDING DEATH, LOSS OR DAMAGE TO ME OR MY PROPERTY**, or other consequences, which might result not only from my own actions, inaction or negligence but also the actions, inaction or negligence of others, or the conditions of the premises or of any equipment used;
- (c) There may be **OTHER RISKS** not known or not reasonably foreseeable; and Understanding All of the above,

(2) I ASSUME ALL OF THE ABOVE RISKS AND RELEASE, WAIVE, DISCHARGE, HOLD HARMLESS, INDEMNIFY AND COVENANT NOT TO SUE:

- (a) Turtle Survival Alliance (TSA), or its members or directors
- (b) the State of Texas, South Carolina or any of their agencies;
- (c) Any affiliated subsidiary, successor, organization, or related companies or businesses, other participants **FROM ANY AND ALL LIABILITY FOR INJURY; INCLUDING DEATH, LOSS OR DAMAGE TO PERSON OR PROPERTY, OR ANY OTHER CONSEQUENCE** in connection with entry in or arising out of participation in, performance in or lack of performance in, including travel en route to and from the research sites.

(3) I FURTHER AGREE THAT:

- (a) Prior to participating, I, or in the case of a minor, a parent or guardian, will **INSPECT** the facilities and equipment to be used, and if I believe same to be unsafe, I will immediately **REPORT** such condition(s) to the Event Leader and either **DECLINE TO PARTICIPATE** or **ASSUME THE RISK** of participating;
- (b) I will **ALLOW** my **PHOTOGRAPH, PICTURE** or **LIKENESS** and/or **VOICE** to **APPEAR** in any official documentary, promotional (including any and all advertisements), television, and radio or film coverage of the event, **WITHOUT COMPENSATION**.

(4) I CONSENT TO ALL EMERGENCY MEDICAL TREATMENT as may be deemed appropriate under existing circumstances by medical personnel.

I HAVE READ THIS FORM IN ITS ENTIRETY AND HAVE PROVIDED TRUTHFUL INFORMATION. I CERTIFY THAT I AM OVER 18 YEARS OF AGE.

Participant Name (Print)	Participant Signature	Date
Participant email address (Print)	Address, City, State, Zip	Cell Phone

All participants must complete this **Agreement, Release and Waiver of Liability** in order to participate in Turtle Survival Alliance volunteer events. **In the event of an emergency, please contact:**

Primary Contact Name	Phone Number	Alternate Phone Number
Alternate Contact Name	Phone Number	Alternate Phone Number

Participation Dates: _____ Springs: _____

We kindly request that all volunteers join the Turtle Survival Alliance. To join, visit www.turtlesurvival.org. Memberships are \$50 for Individuals; \$25 for Students and Seniors; and \$30 to join only the North American Freshwater Turtle Research Group (NAFTRG). Your membership dues support our field work and help to cover expenses for PIT tags, tag readers, calipers, scales, tubs, and other materials. Be sure to check out the [TSA online store](#) to purchase TSA and NAFTRG gear!