FRIENDS OF GLEN GRAY, INC.
200 Midvale Mountain Road, Mahwah, New Jersey 07430-2700
Telephone: 201-327-7234
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Volunteering Event:	Old Guard Work Day	Date(s) of Volunteering:	09/12/2026

VOLUNTEER RELEASE & WAIVER OF LIABILITY

Required by Friends of Glen Gray, Inc. for all volunteers. One form per volunteer, including minors.

I, _____, am volunteering for Friends of Glen Gray, Inc. (FOGG). I understand that these activities may involve risk of injury, which might result not only from my own actions, inactions or negligence but from the actions, inactions or negligence of others. I understand that I am responsible for my own behavior and agree that I will only perform tasks that I feel comfortable and safe doing and that I am medically and physically capable of doing. I understand that FOGG will not cover any medical expenses due to injury received through volunteering with them. I agree to accept all the risks existing in these activities and also agree to release, discharge and covenant not to sue FOGG and their agents, trustees, officers, consultants, employees and other volunteers (the "Releasee") from any and all liability for any expense, claim, personal injury, property damage or other loss or damage of any kind incurred by me during or in connection with my participation in these activities, whether caused or alleged to be caused by the negligence or carelessness of the Releasees or otherwise.

I represent that I am at least 18 years of age (if under 18 years of age, parent signature MUST be filled in below).

Volunteer's name (printed): _____ **Birthdate:** _____

Volunteer's signature: _____ **Date:** _____

Address: _____

Phone: _____ **Email:** _____

Emergency Contact: Name (Print): _____ **Phone:** _____

Volunteers under the age of 18 need to be part of a group that has adequate adult supervision (i.e., two people 21 or older) or be with a parent or legal guardian while participating.

If participant is under 18 years of age: I am the parent or legal guardian of the above-signed minor ("Minor"). I understand the nature of the activities that the Minor will be involved in because of volunteering for FOGG and believe the Minor to be qualified by reason of experience and capabilities to participate in such activities and to be in good health and proper physical condition to do so. I hereby release, discharge and covenant not to sue each of the Releasees from any and all liability for any expense, claim, personal injury, property damage or other loss or damage of any kind on the Minor's account caused or alleged to be caused in whole or in part by the negligence or carelessness of the Releasees or otherwise and further agree that, if I, the Minor or anyone on the Minor's behalf, makes a claim against any of the Releasees, I will indemnify and hold harmless each of the Releasees from any litigation expenses, attorney fees, loss, liability, damage or other cost incurred by them as a result of such claim.

Parent/Guardian Name (printed): _____

Address (if different from above): _____

Phone: _____ **Email:** _____

Parent/Guardian Signature: _____ **Date:** _____