

# Highland Support Project

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## PROFILE AND RELEASE OF CLAIM

REQUIRED OF EACH TEAM MEMBER - please type or print clearly

Team Leader	_____	Departure Date	____/____/____
Project Name	_____	Return Date	____/____/____
Location & Country	_____	Home Phone (____)	_____
Name	_____	Cell Phone (____)	_____
	First Middle Last		
Address	_____	Work Phone (____)	_____
	_____	Date of Birth	____/____/____
	_____	Sex	_____
Email	_____	Passport #	_____
Occupation	_____	Nationality	_____
Employer	_____	Where Issued	_____
		Expiration Date	____/____/____
Emergency Contact	_____		
Relationship to you	_____		
Emer. Contact Phone	(____) _____		

In consideration of the opportunity to participate in the project described above as a volunteer, and in consideration of other obligations incurred by the organization, please review the following agreement and sign below:

- I agree to be respectful of other ideas and other cultures.
- I agree to cooperate at all times with the team leader concerning our work and life together including daily assignments, food, lodging, and transportation; and to stay with the team from beginning to end.
- Further, I hereby release and discharge the organizations which assisted in these arrangements, their agents, employees, and officers, from all claims, demands, actions, judgments, and executions which I ever had, or now have, or may have, or which my heirs, executors, administrators, or assigns may have or claim to have, against the organizations, their agents, employees, and officers, and their successors or assigns for all personal injuries to property, real or personal, caused by, or arising out of, the above described service. I intend to be legally bound by this statement.
- I hereby acknowledge that by engaging in this service trip, I am subjecting myself to certain risks voluntarily, including and in addition to those risks which I normally face in my personal and business life, including but not limited to such things as health hazards due to poor food and water, diseases, pests, and poor sanitation; potential danger from lack of control over local population; potential injury while working; and inadequate medical facilities, etc.

The validity, construction and interpretation of this **PROFILE AND RELEASE OF CLAIM** form shall be governed by and construed in accordance with the domestic laws of the state of Virginia, in which the Highland Support Project is located.

In witness whereof, I have executed this agreement and this release at \_\_\_\_\_ Date \_\_\_\_\_  
(city & state)

Signature \_\_\_\_\_