



**COMMUNITY LODGINGS, INC.
RELEASE OF LIABILITY AND ASSUMPTION OF RISK**

- I. I understand and acknowledge that COMMUNITY LODGINGS, INC. is a charitable, nonprofit organization incorporated under the laws of the Commonwealth of Virginia. All funds of COMMUNITY LODGINGS, INC. are used specifically for the direct benefit and service to its clients; therefore, if I am injured while acting as an unpaid member of the staff in any capacity whatsoever, I realize and am aware that *my own health insurance coverage* will provide for any necessary medical treatment of care. I further understand that I am not covered under Virginia Worker’s Compensation Laws while working as a volunteer at COMMUNITY LODGINGS INC.

- II. I, _____, hereby acknowledge that I have voluntarily applied to be a volunteer for COMMUNITY LODGINGS, INC. located at 3912 Elbert Avenue (Suite 108), with sites located at 607 Notabene Drive, 612 Notabene Drive, 601 Four Mile Run Road, Alexandria, Virginia 22305, and 375 South Reynolds Street, Alexandria, VA 22304.

- III. In consideration of the opportunity afforded me to participate, on a voluntary basis, in helping COMMUNITY LODGINGS, INC. to work on behalf of its clients and project programs, I hereby waive any right or cause of action arising as a result of my participation in said project from which any liability may or could accrue against COMMUNITY LODGINGS, INC., its officers, directors and employees, collectively or individually. Without limiting the generality of the foregoing, I agree that this waiver shall include any rights or causes of action resulting from personal injury to me or damage to my property, or to property under my control, sustained with my activities for the inclusive dates:

_____ to _____

Signature: _____ Date: _____

Name: _____

Name of parent or guardian (if under 18 years old): _____

Parent/guardian’s signature: _____

COMMUNITY LODGINGS, INC. Use Only

Volunteer Coordinator Signature

Date