

## HOPE (Housing Outreach Project Express) Statement of Activities and Release

**Before a volunteer can participate in any of HOPE’s programs, this form, along with the “Registration and Medical Release Form” must be completed and submitted to Mr. Mehle.**

Hope is an emergency home repair project for low income families sponsored by Charleston Catholic High School. For one week each summer, CCHS students, teachers, parents, and alumni volunteer to make the homes of several families warmer, safer, and drier. Building materials are purchased through donated funds.

Volunteers may, in their free time, engage in non-sponsored activities including, but not limited to: hiking, swimming, basketball, volleyball, baseball, football, Frisbee, or other sports activities of their choosing. Planned evening activities include, but are not limited to: attending a mass and picnic at the Church of the Risen Lord in Maysel. Also, volunteers may choose to travel in vehicles driven by work crew leaders to town for an evening snack or ice cream.

**NOTE: Volunteers are not required to engage in any work or recreational activity in which they feel they are not able to safely participate.**

The Participant and the Guardian grant and convey to HOPE Project all right, title, and interest in any and photographic images and video or audio recordings made by HOPE Project during the Participant’s participation with the HOPE Project.

Consent/permission is given for treatment by competent medical personnel as a result of any accident or medical emergency while involved in the activities of the HOPE Project. I understand that I agree that the HOPE Project does not carry accident or medical insurance on participating volunteers. I agree that my insurance company will be used for such medical care expenses and I am aware that I may be billed by the medical provider for any medical treatment expenses not covered by my insurance. I understand that if I do not have medical insurance coverage that I am responsible for the payment of any medical bills.

The foregoing statement of activities and the HOPE Project information and guidelines (specifically HOPE Project’s **Expectations, Rules and Regulations**) have been read and the extent and nature of the activities in which your youth will participate are understood and the HOPE Project, Charleston Catholic High School, the Diocese of Wheeling-Charleston, and their agents, employees and any and all persons connected therewith are hereby released and discharged from any and all liability, claims, and causes of action of any type whatsoever arising out of or in any way connected with participation in the activities of the HOPE Project.

\_\_\_\_\_  
Signature (Participant) – **I certify that I am 18 years of age or older.**

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name of Participant

\_\_\_\_\_  
Signature (**Minor** Participant – volunteer under the age of 18)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name of Minor Participant

\_\_\_\_\_  
Signature of Adult for Minor/Relationship (i.e. parent, guardian, etc.)

\_\_\_\_\_  
Date