



2023 PIT MEMBER REGISTRATION

Everybody Counts 2023
Wednesday, January 25, 2023
7PM – 11PM

NAME: _____

PHONE: _____

EMAIL: _____

TEAM LEADER NAME: _____

Volunteer Waiver and Release *

Please check the box to indicate your agreement with the following terms and conditions: In consideration for the opportunity to participate as a volunteer for the Point in Time County 2023 ("Activity") of the Alliance for Housing, I hereby agree (on behalf of myself, my spouse, family members, representatives, executors, administrators, heirs, next of kin, successors and assigns) to waive, release and discharge the Alliance for Housing, and its directors, officers, agents, representatives, employees, affiliates, licensees, insurers, assignees, designees and successors, both known and unknown (collectively, "The Alliance") from any and all claims, actions, damages, demands, costs, expenses, liens, judgments or liabilities of any kind (including without limitation all liability for my death, disability, personal injury, property damage, property theft) which may hereafter accrue to me arising out of my participation in or performance of the Activity. I realize that, in the course of my duties as volunteer, I may operate a motor vehicle, and I hereby certify to The Alliance that, if I do operate a motor vehicle in the performance of the Activity, I will have and maintain motor vehicle liability insurance, including all applicable no-fault coverage's for any vehicle driven by me in connection with the Activity. I agree that this Volunteer Waiver and Release is intended to be as broad and inclusive as permitted by the laws of the State of Michigan and that if any portion of this Agreement is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect. This Agreement contains the entire understanding of the parties with respect to the subject matter hereof.

I HEREBY CERTIFY THAT I HAVE READ THIS DOCUMENT IN ITS ENTIRETY AND UNDERSTAND AND AGREE TO ALL OF THE TERMS AND CONDITIONS CONTAINED HEREIN.

Please check the box if you give permission to the Alliance for Housing, Oakland County's CoC to record images of you (including photographs, video and motion pictures). This includes the right and permission to use photographs, video/motion pictures and any other recordings of yourself and your property in any media, including, but not limited to, publications, DVDs, videos, websites, and social media outlets such as Facebook, Twitter and other for use in promotion and education. By checking the box you are releasing and discharging Alliance for Housing Oakland County's CoC from any and all claims, actions, or demands arising out of or in connection with the use of any of the above, and including all claims for invasion of privacy and

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libel. Additionally you are granting the use of your full name with the images and recordings. The Alliance for Housing, Oakland County's CoC will not include your fully name with the images and/or recordings without your consent.

I give my permission

I do **not** give my permission

Emergency Contact Information

Please check the box to give authorization to the Alliance for Housing, Oakland County's CoC to contact the following people in case of an emergency:

I give permission to the Alliance for Housing, Oakland County's CoC to contact the following people.

EMERGENCY CONTACT (1) INFO:

Name: _____

Phone: _____

Address: _____

Relationship: _____

EMERGENCY CONTACT (2) INFO:

Name: _____

Phone: _____

Address: _____

Relationship: _____

I understand and agree that the Oakland County Alliance for Housing will have no obligation or liability to notify your emergency contact.

Yes