

TEMPLE  
SHAARAY  
TEFILA



# Waiver for 2019 Spring Mitzvah Day

**Project Name** \_\_\_\_\_

**Phone** \_\_\_\_\_ **Email** \_\_\_\_\_

I understand that I am spending the day as a volunteer on projects organized by Temple Shaaray Tefila with various groups and organizations throughout New York. I understand that I am responsible for my behavior and that I am participating voluntarily on projects in which I feel comfortable. I agree to release, indemnify and hold harmless Temple Shaaray Tefila, its officers, trustees, employees, volunteers, agents and representatives from any and all claims, losses, liability, expenses or damages that may arise in the course of, as a result of, and/or relating to my participation in projects related to Mitzvah Day on May 5, 2019. I understand that this waiver and release is binding on me as well as my heirs, executors and administrators.

## Participants age 18 and older

Name \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

Name \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

Name \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

Name \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

## Participants age 17 and younger

Parent Name \_\_\_\_\_ Child Name \_\_\_\_\_

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent Name \_\_\_\_\_ Child Name \_\_\_\_\_

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent Name \_\_\_\_\_ Child Name \_\_\_\_\_

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent Name \_\_\_\_\_ Child Name \_\_\_\_\_

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_