

VOLUNTEER FORM AND RELEASE OF LIABILITY

Event Name: **ABC T & T Games / Sparks-A-Rama**

Event Date: **Saturday, March 14, 2026**

Location: **Arlington Baptist Church**

Thank you for volunteering to assist with the ABC Games & Sparks-A-Rama. We greatly appreciate your assistance and dedication in reaching children so that they would know, love, and serve Jesus Christ. We take the safety of you and the children we serve very seriously. Before you can participate in an event, you must complete this form.

CHILD PROTECTION BACKGROUND SCREEN: In order to participate as a volunteer, you must have completed a background check within the last three years. In responding to any question below, you do not need to provide information that is included in a record that has been sealed or expunged. If a matter is contained in a sealed or expunged record, you may state that no such record exists. **Please answer the following questions:**

- Yes** **No** Has it been more than three years since your last background check?
- Yes** **No** Have you ever pled guilty, been convicted or charged with any act of neglecting, abusing, injuring or molesting any child?
- Yes** **No** Have you ever been included on a child abuse/neglect registry?
- Yes** **No** Have you ever been included on a sex offender registry or treated as a sex offender?

If your answer to any of the above questions is 'Yes,' you may not serve at today's event.

RELEASE OF LIABILITY

This Release and Waiver of Liability (the "Release") is executed in favor of Arlington Baptist Church, a Maryland not-for-profit corporation, its directors, officers, employees, volunteers and agents (collectively, "Arlington").

You desire to work as a volunteer for Arlington and engage in the activities related to being a volunteer (the "Activities"). You understand that participation in the Activities may include strenuous physical activity, and hereby freely, voluntarily, and without duress executes this Release under the following terms:

Medical Treatment: You hereby release and forever discharge Arlington from any claim whatsoever which arises or may hereafter arise on account of any first aid, treatment, or service rendered in connection with your Activities with Arlington.

Release and Wavier: You hereby release and forever discharge and hold harmless Arlington and its successors and assigns from any and all liability, claims, and demands of whatever kind or nature, either in law or in equity, which arise or may hereafter arise from your Activities with Arlington Baptist Church.

You understand that this Release discharges Arlington from any liability or claim that you may have against Arlington with respect to any bodily injury, personal injury, illness, death or property damage that may result from your Activities with Arlington, whether caused by the negligence of Arlington or its officers, directors, employees, volunteers or agents or otherwise. You also understand that Arlington does not assume any responsibility for or obligation to provide financial or other assistance, including but not limited to medical, health, or disability insurance in the event of injury or illness.

Assumption of the Risk: You understand that the Activities may involve risk of property damage and of personal injury, illness or even death. By signing this Release of Liability, you warrant that you are fully capable of safely participating in all Activities, and you expressly assume the risk of injury or harm in the Activities and release Arlington from all liability for injury, illness, death or property damage resulting from the Activities.

Photographic Release: You hereby grant and convey unto Arlington all rights, title, and interest in any and all photographic images and video or audio recordings made by Arlington during your Activities with Arlington.

Severability. If any portion of this Agreement is determined to be invalid or unenforceable under applicable law, the remainder of this Agreement shall remain valid.

You expressly agree that this Release is intended to be as broad and inclusive as permitted by the State of Maryland and that this Release shall be governed by and interpreted in accordance with the laws of the State of Maryland. I affirm that all answers I have provided on this form are true and accurate.

Volunteer Signature: _____ Date: _____ Mobile Number: _____

Print Name: _____ Your Church Name: _____

Valid Background Check within the past 36 months? Yes No Pastor/Commander Signature: _____

**If volunteer is age 13 to 17, parent/guardian must sign and date:*

Parent/Guardian Signature: _____ Date: _____

Who will be supervising your teen at this event?

Name of person: _____ Mobile Number: _____ Relationship: _____

In case of emergency, please contact:

Name: _____ Mobile Number: _____ Relationship: _____