



# CooperativeAid Inc.

Cooperative Aid, Inc. ("CoopAid"), a non-profit organization located at 663 Villageway, Crossville, TN 38555, is providing administrative and support services related to a mission trip ("Mission Trip") to \_\_\_\_\_ beginning on or about \_\_\_\_\_ and ending on or about \_\_\_\_\_.

I, \_\_\_\_\_, will be participating in the Mission Trip and related activities. Of my own volition and without duress, I make and execute this Liability Release & Waiver as follows:

**1. Assumption of Risk**—I acknowledge that the Mission Trip and its related activities present inherent risks of serious bodily injury, death, and loss of or damage to property. I have considered the risks associated with my participation in the Mission Trip and I hereby voluntarily assume all such risks.

**2. Release**—I assume full responsibility for any personal injury sustained by me resulting from my participation in the Mission Trip, and I do hereby forever release and discharge CoopAid from liability of any kind or character for any loss, injury, or damage thus sustained, whether caused by myself, CoopAid (except when resulting from CoopAid's gross negligence), or a third party. This release and discharge is made on behalf of myself and on behalf of my heirs, assigns, trustees, receivers, administrators, executors and agents.

**3. Indemnification**—I agree to indemnify, hold harmless, and defend CoopAid against all claims, causes of action, damages, judgments, and costs, including attorney fees and other litigation costs, resulting from or reasonably related to my participation in the Mission Trip.

**4. Choice of Law**—Any legal or equitable claim arising under my participation in the Mission Trip shall be resolved under the laws of the State of Tennessee.

**5. Enforceability**—If any of the provisions of this Liability Release & Waiver are held to be invalid by a court of competent jurisdiction under any applicable statute or rule of law, they are to that extent to be deemed omitted without affecting the validity of the remaining provisions hereof.

**I have read, fully understand, and agree to this Liability Release & Waiver. This Liability Release & Waiver contains the entire agreement between myself and CoopAid relating to the above, and all previous communications between the Parties, whether written or oral, with reference to the subject matter of this Agreement are hereby canceled and superseded.**

Executed this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_.

Signature \_\_\_\_\_ Printed Name \_\_\_\_\_

Witness: \_\_\_\_\_ Printed Name \_\_\_\_\_