



international surgical charity for underprivileged children

**TO: Operation Restore Hope Charitable Trust**  
(Registered in New Zealand under No. CC20520)

I have agreed to travel to \_\_\_\_\_ (Country / City) to  
work as a member of an ORH mission, between the dates (from) \_\_\_\_\_  
(to) \_\_\_\_\_ (“the Mission”).

I acknowledge and agree that I will not hold ORH liable, whether directly or indirectly, for any loss, liability, damage, compensation, personal injury, illness, death, cost or expense (including, but not limited to, legal expenses) suffered or incurred by me in any way relating to the Mission or otherwise, whether in negligence, tort, contract or otherwise, and whether as a result of a claim brought against me, or as a result of some other act, matter or thing done to me or suffered by me (including, but not limited to, war (declared or not, and including any act of a public enemy), invasion, civil war, riot, insurrection, revolution, terrorism, hijack, kidnap, sabotage, political disturbance, epidemic, quarantine or natural disaster) and that I will not commence or bring any such claim or action against ORH, and further I indemnify and agree to keep indemnified ORH in relation thereto.

I further acknowledge and agree as follows:

1. I will take out my own suitable travel insurance policy covering me against all usual risks, and any other insurance cover I consider appropriate.
2. The Mission and my involvement with ORH may expose me to any of the risks and dangers described above, and/or to disease, illness, third world conditions, and/or require me to visit locations which may be involved in civil conflict and/or other dangers to me personally; I accept these risks and dangers and I participate in the Mission of my own free will.

Signed: \_\_\_\_\_

Print Full Name: \_\_\_\_\_

Date: \_\_\_\_\_