

**Indemnification and Defense
Mentoring Relationship**

This agreement, hereinafter "Agreement" entered into this (Date) _____ between _____, hereinafter referred to as the 'client', and Dale O. Wolery, Executive Director of the Clergy Recovery Network, a Montana nonprofit religious corporation. Corporate ID Number 46-0482693.

Indemnification

The client agrees subject to Montana Statutes to hold harmless and indemnify Dale O. Wolery of Clergy Recovery Network, its employees, officers, volunteers and agents from any and all liability, loss, costs, damages, and expenses which he or she may sustain or incur by reason of any judgment entered against Dale O. Wolery or Clergy Recovery Network, its employees, officers, volunteers and agents because of the consulting/mentoring, guiding or leadership work done by Dale O. Wolery either directly or indirectly. I agree to hold harmless and indemnify any persons associated with Clergy Recovery Network from any and all liability, loss, costs, damages and expenses including advice given, intervention held, face to face meeting, email, written or other interaction which I deem to injure me or others. I accept full responsibility for my choices and actions which result from interacting with all of the above. I understand Dale Wolery is not a licensed counselor and is merely mentoring as a pastor.

Defense

The client agrees subject to Montana Statutes, to pay, as incurred, the fees of an attorney of Wolery's choosing or one negotiated by Wolery and the client in defending Wolery, the Clergy Recovery Network, its employees, officers, volunteers and agents against any action that may arise out of Wolery's consulting/mentoring or leadership work or any other activity of the Clergy Recovery Network, its employees, officers, volunteers and agents.

Signature: _____ Date: _____

Printed name: _____

Office Phone: (____) _____ Home Phone: (____) _____

Fax Number: (____) _____ Email Address: _____

Address: _____ City: _____ State or

Province: _____

Postal Code: _____ Country: _____

Drivers License State: _____ Number: _____

For the Clergy Recovery Network:

_____ Date: _____

Dale O. Wolery
Clergy Recovery Network, 313 Second Avenue, Joplin, MT 59531
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