



**Volunteer Information and Release Form**

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

Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Bus. Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

E-mail: \_\_\_\_\_

**Emergency Contact:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

Are you a: (Circle One)

Teacher Aide Intern Student Retiree Employee Other(specify) \_\_\_\_\_

School/Business Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

List any special limitations (allergies, medical, physical), which need to be considered with volunteer work assignment: \_\_\_\_\_

\_\_\_\_\_

List special skills, talents and interest that you have to share with volunteering:

\_\_\_\_\_

\_\_\_\_\_

Check Possible Area of Interest:

\_\_\_\_\_ Inventory (Sorting, checking, bundling, counting items and organizing.)

\_\_\_\_\_ Creating Merchandise (die cutting, making flash cards, knitting, crocheting, etc. . . .)

\_\_\_\_\_ Warehouse Organization (Upkeep and organization of the warehouse.)

\_\_\_\_\_ Cleaning and Maintenance

\_\_\_\_\_ Assist with promotional events. \_\_\_\_\_ Assist with photography/videography.

\_\_\_\_\_ Assist with data entry.

\_\_\_\_\_ Other: \_\_\_\_\_

**On The Back**, please sign the waiver and release on the back of this form.

*Thank you for your willingness to volunteer with Teachers' Teammates.*

*With your help our organization can assist the educational and environmental needs of many children and teachers in Delaware County.*



## Conditions of Volunteer's Participation and Release

*Teachers' Teammates* owes its success to the **dedicated** work of our volunteers. Without their time and efforts, many classrooms and students in Delaware County would lack the basic "tools for learning". Our volunteers are an invaluable resource. We realize that due to the inherent nature of volunteer work, there are some risks which will always exist.

### *Please read and agree to the following:*

In consideration of permitting me to participate as a volunteer at *Teachers' Teammates*, and for other valuable consideration, I acknowledge and agree, for myself and/or for my child, and for my executors, heirs, and assigns, that there are certain risks of physical injury as a result of my, or my child's, participation in volunteer activities at *Teachers' Teammates* and I agree to assume the full risk of any injuries, damages, or loss which I, or my child, may sustain as a result of participating in any and all activities connected with or associated with *Teachers' Teammates*.

Therefore, I hereby agree to release and discharge, for myself and/or for my child, and for my executors, heirs, and assigns, *Teachers' Teammates*, and their respective affiliated corporations, shareholders, directors, officers, employees, and agents (collectively, the "Sponsors") and other volunteers, from any and all claims, cost, demands, obligations, injuries, or causes of action of any nature whatsoever (collectively, "Claims") which I might assert, in my behalf and/or in behalf of my child, and which results in any manner from my and/or my child's participation in volunteer activities for *Teachers' Teammates* or the participation in volunteer activities by others, and I hereby agree to indemnify, defend, and hold harmless the Sponsors against any Claims brought by others which result in any manner from my or my child's participation in *Teachers' Teammates* activities.

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I have read and fully understand this release form. Before this registration as a volunteer is valid, this release must be signed by the participant or, if under age 18, by the participant's parent or legal guardian.

**Volunteer's Name (print):** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Volunteer's Signature:** \_\_\_\_\_

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I hereby execute this waiver and release on behalf of the named minor volunteer, who is under age eighteen (18) years of age and represent and warrant that I am a parent or guardian authorized to execute this wavier and release on behalf of such minor.

**Parent/Guardian's Name (print):** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Parent/Guardian's Signature:** \_\_\_\_\_