Volunteer Waiver

First Name:		Last N	ame:		
Organization/Employer:					
Does your company have a mat	ching gift program for v	volunteerism?	Yes No _		
So that we can most accurately other who also volunteers or d If so, what is their name?	onates? Yes No				<u>-</u>
Address:					
City:					
Release Agreement					
I understand that I am voluntee harmless Beyond Hunger and or representatives, agents, and ot claims, causes of actions, or lial arising from or in any way relat premises in connection with months beneficiary of this Release Agree	our lessor, First United (her participating indivious bilities, including reason to my presence on to younteer participation	Church of Oak duals (collecti nable attorne or use of the C	Park, all officers vely, the "Church ys' fees, by or to Church's and/or I	s, directors, employees h" and "Beyond Hungo me, or by or on behal Beyond Hunger's prop	s, volunteers, er") from any and all If of any other person erties and/or
I understand I am expressly ass participation at Beyond Hunger					my volunteer
I understand that while volunte hereby grant permission and co video, pictures of my participat part of any future publications, such use shall be without paym	onsent for Beyond Hung ion. I further agree tha brochures, other print	ger and its au t any or all of ed material, c	thorized represe the material pho or social media po	ntatives to record, via otographed may be us	photography or ed, in any form, as
the undersigned chaperone, pathat he or she is executing these of the minor volunteer, that he undersigned is binding himself, next of kin, assigns and legal re	rent or guardian of the e forms on behalf of, a /she is fully authorized /herself, the Volunteer	e minor Volunt nd as an agen to do so, and and any othe	teer hereby cove it for, any other i that by executin	enants, warrants, repro individual who may be ng such Volunteer Rele	esents and agrees a parent or guardian ease form, the
Minors ages 11 and under mus or attend volunteer orientation as an additional meeting with produnteer.	t volunteer with a pare n. Minors ages 12 - 14 n	nt/guardian c nay volunteer	independently a	after attending volunte	eer orientation as wel
All information obtained, include Hunger.	ling name, address, tel	ephone numb	ers, etc., shall be	e kept strictly confider	ntial by Beyond
By signing below, I express my	understanding and inte	ent to enter in	to this Release A	greement willingly an	d voluntarily.
Signature:	Date:				
☐ I would like to receive ema					



