

Volunteer Liability Waiver Agreement

All Volunteers of AIO and its programs, regardless of age, must completely read and sign this Liability Waiver and Emergency Contact information prior to their first volunteer shift. If you are under the age of 18 years, a parent or legal guardian must sign this waiver also.

Description of Risk: It is possible that your involvement could result in personal injury. AIO will provide orientation and training to alert Volunteers to work condition risks. Risks include but are not limited to bending, stooping, reaching, kneeling, lifting and carrying. I certify that I am in good health and physically able to perform such work. I acknowledge that this volunteer work may involve risk of injury from such work and I agree that I am volunteering for AIO at my own risk. _____ (Initials)

Volunteer Agreement: In signing this Liability Waiver, I agree that I am willingly volunteering with AIO and its programs. I agree to work in a safe and responsible manner. I agree to only perform work that I am comfortable doing and that I feel I can accomplish safely. If I am not comfortable with a task, I will immediately notify AIO staff. I agree to wear proper clothes and shoes that I believe will provide protection according to the work conditions. _____ (Initials)

Release: I hereby release AIO, any and all sponsoring organizations or partners, and property owners from any and all claims that may arise from or result in any expenses, personal injury, loss or damage incurred to me or by me during my participation with AIO. _____ (Initials)

Adult/Child Photographic Release: Do you consent to film, photo, or video that may be taken of you while you are volunteering at AIO to be used by AIO or any of its programs for publicity and/or advertising? By agreeing to this you are releasing AIO and its programs from any liability in connection with the use of these materials. ____ Yes ____ No

Information Waiver: I understand that any information I choose to provide AIO will be held in confidence and that AIO and its programs may use and reproduce anonymously compiled survey results, including any information I may have provided, for purposes of program evaluation, communication and publication. _____ (Initials)

Policies: To create a safe environment for everyone, no smoking, Firearms and weapons of any kind, alcohol, drugs, animals, except service animals, are permitted on premises. _____ (Initials)

Participant and Parent Information MUST COMPLETE IN FULL

Participant's Name (please print): _____

Participant's Signature of Agreement: _____ Date _____

Parent/Legal Guardian's Name (please print): _____

Parent/Legal Guardian's Signature: _____ Date _____