



DAY OF ACTION VOLUNTEER RELEASE FORM

A release form is needed for each volunteer

Company/Organization: _____

Name: _____ **Phone:** _____

Email: _____

Emergency Contact: _____ **Phone:** _____

LIABILITY RELEASE - I hereby release, indemnify and hold harmless Susquehanna Valley United Way, the organizers, the agency at which I volunteer and sponsors and supervisors of all activities, from any and all liability in connection with any injury (including any injury caused by negligence) in conjunction with Day of Action. I likewise hold harmless from liability any person transporting me to or from any United Way activity.

I also certify that I am in good health and able to participate in the program activities during the Day of Action. I certify that I am over eighteen years of age and am competent to contract my name insofar as the above is concerned. I have read the foregoing release, authorization, and agreement, before affixing my signature below and warrant that I fully understand the contents thereof.

Signature: _____ Date: _____

COMMUNICATIONS RELEASE- I hereby assign the rights to the video and/or photographic recording(s) made of me by Susquehanna Valley United Way or its agency(s), hereafter referred to as United Way, to said United Way. I hereby authorize the editing, duplication, reproduction, copyright, exhibition, broadcast, and/or nonprofit use and distribution of said recording(s) for purposes deemed suitable by United Way.

I hereby waive any right to approve the finished products. I hereby certify that I am over eighteen years of age and am competent to contract my own name insofar as the above is concerned.

I have read the foregoing release, authorization, and agreement, before affixing my signature below and warrant that I fully understand the contents thereof.

Signature: _____ Date: _____

PARENTAL CONSENT/RELEASE- If the individual is a minor (under 18 years of age) the following must be signed by a parent or legal guardian.

I hereby consent and agree, individually and as a parent or legal guardian of, to all the terms and provisions above.

Signature: _____ Date: _____

Name (please print) _____ Relationship to minor: _____

Address: _____ Phone: _____