VOLUNTEER CONSENT FORM



<u>Volunteer Information</u>
Full Name:
Phone Number: Email Address:
Emerg. Contact Name: Emerg. Contact Phone Number:
Volunteer Acknowledgement
I hereby agree to volunteer for Cedarkirk Camp & Conference Center on the date of I understand that my participation in this event is voluntary, and I am aware of the nature of the activities that will be undertaken, which may include manual labor, heavy lifting, use of tools, and exposure to outdoor environments.
I certify that I am physically fit, have not been advised otherwise by a qualified medical professional, and am capable of participating in the tasks required during the workday.
Waiver and Release of Liability
In consideration of the opportunity to participate in the work day event, I hereby release and hold harmless Cedarkirk Cam & Conference Center, its officers, directors, agents, and affiliates from any and all liability, claims, demands, and causes of action of any kind that may arise from or relate to my participation in this event, including but not limited to personal injury, property damage, or wrongful death, whether caused by negligence or otherwise.
Medical Consent
In the event of an emergency, I authorize Cedarkirk Camp & Conference Center to seek medical treatment for me, including emergency medical transportation if necessary. I understand that every effort will be made to contact my emergency contact listed above prior to Cedarkirk staff making medical decisions for me. I understand that I will be responsible for any medical expenses incurred.
Photography/Media Consent
I grant Cedarkirk Camp & Conference Center permission to use photographs or videos taken of me during the volunteer event for promotional, educational, or other nonprofit purposes. I understand that I will not be compensated for the use of such media.
Volunteer Commitment
I understand that I am expected to abide by all safety guidelines, policies, and procedures provided by Cedarkirk Camp & Conference Center, and to act responsibly during the event to ensure my safety and the safety of others.
Signature: Printed Name:
Date:
For minors, under the age of 18: I, the parent/legal guardian of the minor named above, consent to my child's participation in the volunteer workday and agree to the terms of this Volunteer Consent Form.
Parent/Guardian Name:
Parent/Guardian Signature:
Date: