

## Hands On Orlando - Volunteer Information Profile

Please print, read and complete this form. Your signature is required to participate. Bring this form to your project. Thank you.

NAME:

E-MAIL:

ADDRESS:

TELEPHONE:

Emergency Contact Person: \_\_\_\_\_ Telephone: \_\_\_\_\_

I am an adult (age 18 or over). Yes  No  If no, a guardian's signature is required (see below).

**INFORMED CONSENT**

I want to become a Hands On Orlando Inc. (HOO) volunteer and understand that by volunteering, HOO is providing a free service to me. I will only perform activities that I am comfortable doing and will work at my own pace. I understand that my participation may involve physical activity, contact with unfamiliar persons and travel to and from various locations. Knowing this, I assume all risk with respect to any accidents or injuries to person or property that I may sustain, including death. In addition, I hereby release and forever indemnify HOO, its directors, officers, employees, community partners, sponsors, volunteers, affiliates, agents, designees, and successors from any and all liability or responsibility, including claims based upon the actions or inactions of any of the released parties for any damage to property or personal injury, including death. I grant HOO the right to photograph, videorecord, and interview me and give it full and perpetual permission to use resulting pictures, depictions, images and quotes in its accounts and promotions, for no financial consideration whatsoever. If I do not fully comprehend this statement I will seek legal advice before signing.

VOLUNTEER'S SIGNATURE:

PROJECT:

GUARDIAN'S SIGNATURE:

This is required for all volunteers under the age of eighteen.

DATE: © Hands On Orlando Inc.

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