



## Youth Volunteer Registration Form

First Name: \_\_\_\_\_

Last Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: ( \_\_\_\_\_ ) \_\_\_\_\_ Cell Phone: ( \_\_\_\_\_ ) \_\_\_\_\_

Email Address: \_\_\_\_\_

**IMPORTANT:** Please note all Pittsburgh Cares' Confirmation Emails **WILL BE SENT TO THIS EMAIL ADDRESS**, including registration confirmation, project reminders, exact project addresses, & directions to project locations.

Emergency Contact: \_\_\_\_\_ Phone: ( \_\_\_\_\_ ) \_\_\_\_\_

Name of School, Program, or Group: \_\_\_\_\_

How did you hear about Pittsburgh Cares? \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Sex: • Male • Female

Race/Ethnicity: • African-American • Asian  
• Caucasian • Hispanic  
• Native American • Pacific Islander  
• Other

### Terms and Conditions

I wish to volunteer my services to various community service organizations through Pittsburgh Cares, a Pennsylvania non-profit, charitable corporation.

In consideration of Pittsburgh Cares providing me with the opportunity to perform some volunteer activities and intending to be legally bound hereby, I waive, release, and forever discharge Pittsburgh Cares and its directors, officers, members, employees, and agents from any and all liability, causes of action, suits, proceedings, damages, judgments, claims and demands whatsoever arising out of my participation as a Pittsburgh Cares volunteer or in any Pittsburgh Cares related activity.

Moreover, I am aware that there are inherent risks of injury to myself, my property and third parties arising from such volunteer activities and I voluntarily assume all such risk and damage arising therefrom, and intending to be legally bound hereby, will hold Pittsburgh Cares and its agents, servants, and employees harmless from any and all liability, actions, causes of action, claims and demands of every kind and nature whatsoever which I now have or which may arise out of or in connection with my volunteer services.

I understand that representatives of Pittsburgh Cares and/or the news media may occasionally take photographs or shoot film footage of volunteers at project sites and I give my permission for my image to be used by Pittsburgh Cares in occasional publicity materials.

Volunteer Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian Signature\*: \_\_\_\_\_ Date: \_\_\_\_\_

*\*If volunteer is under 18 years of age*