



**Volunteer Registration and Release of Liability Agreement
Faith Christian School-Project Faith 2021**

A signed waiver is required for each volunteer, student or adult
One form for each volunteer – please only one name per form.
All student participants require a parent signature
Return this form to your homeroom teacher or first period teacher by March 4.

Name of Volunteer: _____

Address: _____

Student Grade/Teacher: _____

Releases

I acknowledge that I am participating in general duties for volunteer purposes and acknowledge that my participation is voluntary and I will not be compensated.

In consideration of permission to act as a volunteer for HopeTree Family Services, I release HopeTree Family Services, its directors, officers, and employees from any claims resulting in personal injury, accident or illness (including death), and property loss resulting from, but not limited to, participation in or observation of activities, and use of its facilities, premises, or equipment.

I understand that if I have ever been convicted of a crime, including but not limited to a sexual violation, other than a traffic violation it must be disclosed. I understand that HopeTree Family Services may conclude that certain individuals having a criminal background may not be suitable to act as a volunteer for our organization.

Acknowledgment of Understanding: I have read this waiver of liability, fully understanding its contents, and understand that I agree to release HopeTree Family Services from liability of any claims deriving from any and all volunteer activities performed on behalf of HopeTree Family Services.

I acknowledge that I am signing this agreement freely and voluntarily, and intend by my signature, that this document is to be a complete and unconditional release of all liability to the greatest extent allowed by law.

Student

Student Volunteer Name

Date

Parent Signature

Adult

Volunteer name

Adult Volunteer Signature

Date