



Please return this form by: February 25, 2022

Please Print Clearly

STRAWBERRY FESTIVAL Volunteer Application 2022

Name: \_\_\_\_\_ Email: \_\_\_\_\_
Organization or Group: \_\_\_\_\_ Date of Birth: \_\_\_\_\_
Address: \_\_\_\_\_
City: \_\_\_\_\_ Zip: \_\_\_\_\_
Phone: ( ) \_\_\_\_\_ Emergency Contact: \_\_\_\_\_

Shift 1: 8:30-11:30am
Shift 2: 11:00am-2:30pm
Shift 3: 2:00-5:00pm
Shift 4: 5:00-8:00pm (helps with Festival clean up)

Saturday March 5th
Please indicate which shift you would like to work

SHIFT NUMBER
1 2 3 4
8:30-11:30am 11am-2:30pm 2-5pm 5-8pm
[ ] [ ] [ ] [ ]

[ ] I'd like to be an all day volunteer. (8:30am - cleanup)

The Volunteer /Parent/Guardian here by freely, voluntarily, and without duress executes this Release under the following terms:

Release and Waiver: Volunteer /Parent/Guardian does hereby release and forever discharge and hold harmless Habitat and its successors and assigns from any and all liability, claims, and demands of whatever kind or nature, either in law or in equity, which arise or may hereafter arise from Volunteer's Activities with Habitat.

Medical treatment: Volunteer/Parent/Guardian does hereby release and forever discharge Habitat from any claim whatsoever which arises or may hereafter arise on account of any first aid, treatment, or service rendered in connection with the Volunteer's Activities with Habitat.

Assumption of the Risk: The Volunteer/Parent/Guardian understands that the Activities may be hazardous to the Volunteer, including, but not limited to, construction, loading and unloading, and self-transportation to and from the work sites.

Insurance: The Volunteer understands that, except as otherwise agreed to by Habitat in writing, Habitat does not carry or maintain health, medical, or disability insurance coverage for any Volunteer. Each Volunteer is expected and encouraged to obtain his or her own medical or health insurance coverage.

Photographic Release: Volunteer/Parent/Guardian does hereby grant and convey unto Habitat all right, title, and interest in any and all photographic images and video or audio recordings made by Habitat during the Volunteer's Activities with Habitat, including but not limited to, any royalties, proceeds, or other benefits derived from such photographs or recordings.

Other: Volunteer /Parent/Guardian expressly agrees that this Release is intended to be as broad and inclusive as permitted by laws of the State of Florida, and that this Release shall be governed by and interpreted in accordance with the laws of the State of Florida.

Volunteer Signature Parent/Guardian Signature Date

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