



Goodman Community Center Volunteer Release THANKS for your help!

Name: _____ D.O.B.: _____

E-mail address: _____ Phone: _____

Home address: _____

City: _____ State: _____ Zip: _____

Employer/Group: _____

Optional: (this helps us see how we're doing at encouraging & welcoming diversity):

Race: Asian Black Native American Pacific Islander White Multiracial
 Other Unknown Gender: Female Male Other: _____

Please contact me about: Volunteering at other special events Becoming a regular volunteer

Emergency Contact:

Name: _____

Relationship: _____ Telephone: _____ Alternate: _____

Legal Release:

I choose to participate as a volunteer for the Goodman Community Center. I understand that these services are being offered on a voluntary basis without anticipation of any financial reimbursement. I agree that I will abide by any rules and direction and will report any injury or incident immediately to my supervisor.

I give my permission and consent to the GCC and any agency affiliated with the center to use, print, copy, publish, and reproduce any and all videotapes, audio tapes, photographs, films, negatives, prints reproductions, and likeness or any kind now or hereinafter of myself made by the GCC for advertising, publicity, display, or any purpose whatsoever without fees to be paid to myself or my child. I hereby waive any right I may have to inspect and/or approve the finished product or the advertising copy that may be used in connection therewith or the use to which it may be applied.

I certify that all information provided on this application is true and I authorize the Goodman Community Center to attain any relevant information regarding my desire and ability to volunteer.

Signature _____ Date _____

(You must be at least 18 years of age to sign. If volunteer is under 18, parent/guardian must sign.)

If this application/release is for a minor, please complete the following:

Parent/guardian's name (please print): _____