

# Berkeley Township Recreation - Volunteer Participation Form



Name: \_\_\_\_\_ Date: \_\_\_\_\_

Age: \_\_\_\_\_ (so we can place you accordingly) Cell Phone: \_\_\_\_\_

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

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

Emergency Contact Person & cell: \_\_\_\_\_

Please list any health conditions or medications that might limit or effect participation.

Do you have experience in a leadership role in a recreation program?

**Please place a check mark next to the programs you would like to volunteer for.**

\_\_\_ Annual Easter Egg Hunt

\_\_\_ Senior Programs

\_\_\_ Community Pride Day

\_\_\_ Summer Camp Registration

\_\_\_ Farmers Market

\_\_\_ Summer Concert Series

\_\_\_ Mayors Golf Outing

\_\_\_ Trick or Trunk

\_\_\_ Santa's Calling

\_\_\_ Youth Day

Availability: One-time event \_\_\_\_\_ Summer only \_\_\_\_\_ Year-round \_\_\_\_\_ As needed \_\_\_\_\_

## **Agreement to participate**

*I hereby give my approval to participate in the activities associated with the volunteer program. I assume all risks and hazards incidental to such participation, including transportation to these activities and do hereby waive, release, absolve, indemnify and agree to hold harmless Berkeley Township and all of its employees, participants, etc. whether the result of negligence or any other cause.*

**Photography Waiver:** *Berkeley Township Recreation has my permission to use my publically to promote the program. I understand that the images may be used in print publications, online publications, presentations, websites and social media. I also understand that no royalty, fee or other compensation shall become payable to me by reason of such use.*

Signature: \_\_\_\_\_

If student is under age 18, Parent or Guardian Signature: \_\_\_\_\_

Parent or Guardian's Name (Please Print) \_\_\_\_\_