



**Volunteer Agreement**

**The Children's Hunger Project**  
26 Forrest Avenue  
Cocoa, FL 32922  
321-610-1900  
www.thechildrenshungerproject.org

Name: \_\_\_\_\_ DOB: \_\_\_\_\_  
Last First

Address: \_\_\_\_\_  
Number and Street City State Zip

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

Are you a student? Yes No School: \_\_\_\_\_

Employer/Position: \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_ Contact Phone: \_\_\_\_\_

Hobbies, Memberships, Volunteer Experience: \_\_\_\_\_

How did you hear about us? \_\_\_\_\_

*Volunteer Interests:*

- Packing food
- Social media/website
- Weekly school deliveries
- Special events/fundraising
- Office/clerical work
- Event setup/tear down

Volunteer Availability: \_\_\_\_\_

**Waiver and Release of Liability**

I \_\_\_\_\_ HEREBY WAIVE AND RELEASE, indemnify, hold harmless and forever discharge The Children's Hunger Project, Inc. and its agents, employees, and officers, of and from any and all claims, actions or losses for bodily injury, property damage, wrongful death, expenses, causes of action, lawsuits, damages and liabilities, of every kind of nature, whether known or unknown, in law or equity, that I ever had or may have, arising from or in any way related to my participation volunteer activities for The Children's Hunger Project, Inc.

By this waiver I assume any risk, and take full responsibility and waive any claims of personal injury or death or damage to personal property associated with my involvement in The Children's Hunger Project, Inc. volunteer activities and the aforementioned released party.

I permit the use of any photos, slides, films, or sketches taken of me during The Children's Hunger Project, Inc. activities for publicity, advertising, promotion or other commercial purpose. The above agreement shall be binding on my heirs, successors, assigns, administrators, and executors.

I HAVE READ THE ABOVE WAIVER AND RELEASE AND BY SIGNING IT AGREE. IT IS MY INTENTION TO EXEMPT AND RELIEVE The Children's Hunger Project, Inc. FROM LIABILITY FOR PERSONAL INJURY, PROPERTY DAMAGE OR WRONGFUL DEATH CAUSED BY NEGLIGENCE OR ANY OTHER CAUSE.

**PLEASE LIST ANY MINORS:**

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

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

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