

“Way of the Cross” Volunteer Form

Thank you for your interest in volunteering! Please fill out the information below.

Name (first/last): _____

Address: _____

Phone: _____ Email: _____

Preferred method of contact: _____

Emergency contact name and phone: _____

Volunteer experience: _____

Gardening experience: _____

Anticipated start date: _____ # Hours per week you would like to volunteer: _____

Available on:

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Mornings							
Afternoon							
Evenings							

Participation in activities carries with it a certain assumption of risk. Please read the information below before signing.

Liability Waiver and Release: This release is intended to protect the Cathedral Parish, its owners, officers, employees and agents from any and all liability related to voluntary participation in parish activities.

Unconditional Waiver: I, _____ agree that in the event that myself and/or child/ward sustain personal injury or property damage as a result of participation in any volunteer effort offered through the Cathedral Parish, that the Cathedral Parish and its owners, officers, employees and agents will not be liable for such injury or damage. Furthermore, all liability, claims, demands, and causes of action whatsoever, arising out of or related to any loss, damage, or injury, including death, that may be sustained by the participant and/or associated participant, while in or upon the premises upon which Cathedral Parish programs or activities are conducted, or in route to or from any of the Cathedral Parish premises, or while at any premises or place when activities sponsored by or participated in by the Cathedral Parish, its owners, officers, employees and/or agents.

Assumption of the Risk: I understand that the participant(s) choose to voluntarily enter upon any premise under the control of the Cathedral Parish and that it is my responsibility to inquire about the parameters of the volunteer activities and to assess the ability of my child/ward and myself to safely participate. I further understand that certain activities are potentially dangerous, and I assume on behalf of myself and my child/ward all risks associated with participation in any activity.

Effect: I understand that this liability waiver and release is binding as to my family members, heirs and executors. I hereby acknowledge that the Cathedral Parish has made no warranties or representations concerning the condition or nature of the property where the Way of the Cross garden is located and that I will enter onto said property and participate in gardening activities at my own risk and with the full knowledge that there is a potential that I may injure myself or another in some way.

I hereby declare that I am 18 years of age, or older, and that I have read the above statements and understand the consequences of signing this liability waiver and release.

Liability and Waiver Release Signature: _____ *Date:* _____

Photo Release: I authorize the Cathedral Parish to use any photos, video or any form of media taken of myself for any kind of promotional advertising and/or marketing for the church.

Photo Release signature: _____ *Date:* _____