

VOLUNTEER REGISTRATION

Name: _____

Mailing Address: _____

Phone Numbers Home: _____ Cell: _____ Work: _____

Email Address: _____

What is the best way to contact you (circle one): email cell phone home phone text message

Employer: _____

Emergency Contact

Name: _____

Phone Number: _____ Alternate phone number: _____

Are you with a group? Yes No Name of group: _____

Media Release

Webster-Rock Hill Ministries (WRHM) has my permission to use my or my child's photograph publicly to promote WRHM. 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.

Agreement and Signature

I understand I am volunteering my services to Webster-Rock Hill Ministries. I hereby release, indemnify and hold harmless Webster-Rock Hill Ministries, its officers, employees, legal representatives, organizers, sponsors and supervisors of its activities, from any and all claims, causes of action and liability arising from or in any way connected with my volunteer participation with Webster-Rock Hill Ministries.

I understand I am expressly assuming all risk, including but not limited to all risk of injury, associated with my volunteer participation at Webster-Rock Hill Ministries and/or any activity conducted offsite in behalf of Webster-Rock Hill Ministry.

Print Name: _____ Date: _____

Signature: _____