



Event type: _____

Date of event: _____

School & Teacher name: (if applicable) _____

For Field Trip events: Parent Chaperone / Teacher / Staff / Student
(Circle applicable options)

FRIENDS OF NORTH CREEK FOREST Volunteer Liability Waiver

BY SIGNING this Liability Waiver I agree to hold landowners, Friends of North Creek Forest (FNCF) and all of its members harmless for any injury resulting from my visit and volunteer work.

I further agree to work safely around all others and place their safety and my own above all other considerations. I will notify a FNCF representative immediately if I should receive any injury. If fatigued I will stop work until I recover. I will remain hydrated and watch for potential hazards to myself and other volunteers. I will report unsafe conditions or behavior at once.

VOLUNTEER CONTACT INFORMATION: *** Please print legibly***

PRINTED NAME: _____ CIRCLE ONE: Youth / Adult
(Ages 1-17)

ADDRESS: _____

CITY: _____ ZIP: _____

EMAIL: _____ PHONE: _____

EMPLOYER: _____ EMPLOYER MATCHES DONATIONS? YES NO Don't Know
(If applicable) (Circle applicable choice)

SIGNATURE: _____ DATE: _____
(If under 18 years of age this must be signed by a parent or legal guardian)

EMERGENCY CONTACT:

PRINTED NAME: _____ PHONE: _____

WE WANT TO KEEP IN TOUCH WITH YOU!

We count on the interest and involvement of our community to protect and steward the forest. We will not sell or share your contact information and you can unsubscribe from our mailing list at any time.

PHOTO RELEASE:

By checking this box I **opt out** of photos of me and/or my child to be used in Friends of North Creek Forest publications, including website, Facebook Page & printed materials. I understand it is my responsibility to avoid being photographed.

Office use only: (initials & date completed) : LGL _____ & _____ Thank you sent _____ & _____

