



SPECIAL EVENT VOLUNTEER APPLICATION

FAMILY Y OF GREATER AUGUSTA

Thank you for sharing your time and talents with us as a special event volunteer.

Please provide the information below and sign the participant release on the back.

If you would like volunteer with the Y on an ongoing basis, there is a more comprehensive application process. A volunteer packet is available online at www.thefamilyy.org

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: Day () _____ Evening () _____

E-mail address: _____

Emergency contact: _____ Phone: _____

Birthday: ____ / ____ / ____ (If under age 16, must volunteer with a parent or guardian. Parent or guardian must fill out a volunteer application.)



THE FAMILY Y OF GREATER AUGUSTA

MEMBER and PARTICIPANT RELEASE and WAIVER of LIABILITY and INDEMNITY AGREEMENT

IN CONSIDERATION FOR PROGRAMS AND ACTIVITIES of the Family Y of Greater Augusta for any purpose, including, but not limited to observation or use of facilities or equipment, or participation in any off-site program affiliated with the Family Y of Greater Augusta, the undersigned, for himself or herself and any personal representatives, heirs, and next of kin, hereby acknowledges, agrees and represents that he or she has, or immediately upon entering or participating inspect and carefully consider such premises and facilities or the affiliated program. It is further warranted that such entry into the Family Y of Greater Augusta for observation or use of any facilities or equipment or participation in such affiliated program constitutes an acknowledgement that such premises and all facilities and equipment thereon and such affiliated program have been inspected and carefully considered and that the undersigned finds and accepts same as being safe and reasonably suited for the purpose of such observation, use or participation.

IN FURTHER CONSIDERATION OF BEING PERMITTED TO ENTER THE FAMILY Y OF GREATER AUGUSTA FOR ANY PURPOSE INCLUDING, BUT NOT LIMITED TO OBSERVATION OR USE OF FACILITIES OR EQUIPMENT, OR PARTICIPATION IN ANY OFF-SITE PROGRAM AFFILIATED WITH THE FAMILY Y OF GREATER AUGUSTA, THE UNDERSIGNED HEREBY AGREES TO THE FOLLOWING:

1. THE UNDERSIGNED HEREBY RELEASES, WAIVES, DISCHARGES AND CONVENANTS NOT TO SUE the Family Y of Greater Augusta and all branches thereof, its directors, officers, employees, and agents (hereinafter referred to as "releasees") from all liability to the undersigned, his personal representatives, assigns, heirs, and next of kin for any loss or damages, and any claim or demands therefore on account of injury to the person or property or resulting in death of the undersigned, whether caused by the negligence of the releasees or otherwise while the undersigned is in, upon, or about the premises or any facilities or equipment therein or participating in any program affiliated with the Family Y of Greater Augusta
2. THE UNDERSIGNED HEREBY AGREES TO INDEMNIFY AND SAVE AND HOLD HARMLESS the releasees and each of them from any loss, liability, damage or cost they may incur due to the presence of the undersigned in, upon or about the Family Y of Greater Augusta premises or in any way observing or using any facilities or equipment of the Family Y of Greater Augusta or participating in any program affiliated with the Family Y of Greater Augusta whether caused by the negligence of the releasees or otherwise.
3. THE UNDERSIGNED HEREBY ASSUMES FULL RESPONSIBILITY FOR AND RISK OF BODILY INJURY, DEATH OR PROPERTY DAMAGE due to negligence of releasee or otherwise while in about or upon the premises of the Family Y of Greater Augusta and/or while using the premises or any facilities or equipment thereon or participating in any program affiliated with the Family Y of Greater Augusta

THE UNDERSIGNED further expressly agrees that the foregoing RELEASE, WAIVER AND INDEMNITY AGREEMENT is intended to be as broad and inclusive as is permitted by the law of the State of Georgia and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding continue in full legal force and effect.

THE UNDERSIGNED HAS READ AND VOLUNTARILY SIGNS THE RELEASE AND WAIVER OF LIABILITY AND INDEMNITY AGREEMENT, and further agrees that no oral representations, statements or inducement apart from the foregoing written agreement have been made.

I HAVE READ AND UNDERSTAND THIS DOCUMENT AND RELEASE

Date: _____ Signature of Applicant: _____

Print Name: _____

Address: _____ Additional Adult on the Membership: _____

_____ Print Name: _____

Signature: _____