



VOLUNTEER CONTACT INFORMATION

Name: _____

Minor's Name(s) (if applicable): _____

I am the parent/legal guardian for minor(s)

Volunteer Group (if applicable): _____

Location:

- PATH Ventures PATH Gramercy PATH San Diego
- PATH West Los Angeles PATH Santa Barbara PATH San Jose
- PATH Los Angeles

Emergency Contact Name: _____ Relationship: _____

Emergency Contact Phone Number: (____) ____ - _____

ONGOING VOLUNTEER TIME SHEET

Please check in *before and after* each volunteer shift. **Note that ALL members of a volunteer group must check-in on separate forms. Parents and minors may share forms.** Thank you in advance for your compliance!

Date	Volunteer Program (ex. PATHCooks)	Time In	Time Out

Please do not forget to sign the Release of Liability portion on the other side →



VOLUNTEER AGREEMENT AND RELEASE OF LIABILITY

By voluntarily participating at or with PATH, I, the Undersigned, release PATH from any liability, action, claims, expenses or compensation related to my participation with PATH and any incidents arising in connection to my activities with PATH.

I acknowledge that my services at PATH will be voluntary and I understand that I will be a volunteer and not an employee for Worker’s Compensation claims as provided in Section 3353 of the California Labor Code, or any other reason. I acknowledge that I will not be able to claim for Worker’s Compensation benefits should I suffer an injury during the performance of my volunteer/community service duties. I agree to assume all risks connected with my volunteer/community services. I further agree to release PATH, its employees, volunteers, or clients from any and all liability, claim, demand or cause of action or litigation arising out of personal injury, illness, death or property damage that I may suffer while performing volunteer/community service work.

I agree that I will not name, or have named, any of the parties mentioned above as defendants or cross-defendants in any litigation arising out of my volunteer/community service work. I further agree that I will save and hold harmless these parties from any other claims, demands, and causes of action or litigation arising out of said services including but not limited to actual damages, general damages, punitive damages, attorney fees and cost suit.

Furthermore, I as a volunteer agree that I will not disclose or use any of PATH’s confidential information, either during or after my time volunteering. PATH has a legal and ethical responsibility to safeguard the privacy of all clients and protect confidentiality and security of all health information

Lastly, the event organizers and other participants may take photographs and video with sound during the event. By registering for this event, I give consent for the organizers, sponsors, and other participants to publicly use these materials on the internet and/or broadcast without additional notice and without compensation in perpetuity. Individuals will never be identified by name in any of the materials unless prior written consent has been obtained from those individuals. If you do not wish to appear in any photos or videos, please inform the Volunteer Ambassador, shelter staff members, or Development Associate for Volunteers.

I hereby warrant that I am under/over eighteen years of age and competent to contract in my own name insofar as the above is concerned. I have read the foregoing release, authorization and agreement, before affixing my signature below and warrant that I fully understand the contents thereof. Refusal to sign this release will resort in my exclusion from participating in PATH’s volunteer programs.

Signature*

Date*

Print Name*

Program/Event Participating in (ex. PATHCooks) *

E-mail / Phone Number*

Address/ City / State/ Zip*

For people under the age of 18, a parent or guardian’s name and signature is required:

Name of child(ren) (Printed) *

Parent/Guardian Name (Signed) *

Description of appearances in photo/video:

Parent/Guardian Name (Printed) *

(Ex. Blue jeans, white sneakers, red baseball cap, green shirt)

_____ I do not wish to be in any photos/videos

REQUIRED FIELDS*