



Yadkin Christian Ministries

VOLUNTEER INFORMATION FORM

Date:

First Name:	Last Name:
Street Address	City& State:
Zip:	Birthday:
Home phone:	Cell phone:
Email:	
What days of the month do you wish to serve?	
Which location Yadkinville or East Bend do you want to serve?	
Emergency Contact Name	Emergency Contact Phone number:
Is there any medical condition we need to be aware of in case of emergency?	

Yadkinville location:
Phone: 336-677-3080
Fax: 336-677-3915

East Bend location:
Phone: 336-699-4544
Fax: 336-699-2350

RELEASE OF LIABILITY

Being the undersigned individual, I acknowledge that I will be engaged in volunteer service in the form of special events, warehouse, office and related duties for Yadkin Christian Ministries (YCM). I agree to perform volunteer duties to which I am assigned to the best of my ability and in a professional manner. I am aware that volunteering at the YCM involves certain risks, which may include bodily injury and property damage. Therefore, I acknowledge and agree as follows:

RELEASE

YCM is not responsible for any accident, injury, damage, loss or liability incurred by me while volunteering services for YCM or as part of a YCM project. I agree not to hold YCM and its former or current directors, Board of Directors, employees, agents, predecessors, successors, assigns, representatives, attorneys, subsidiaries, and affiliates responsible for any and all liability, lawsuits and/or claims which may arise from or otherwise be connected with a YCM project or volunteer service, including but not limited to any physical injury, or other injury or damage to me or my property, whether occurring on or off the premises owned or operated by YCM. I acknowledge that I will take part in heavy lifting up to 50 pounds.

INSURANCE

I understand YCM has limited medical liability insurance. I am solely responsible for ensuring that I have adequate coverage for any injuries or damages sustained by me while volunteering with YCM.

PHOTOGRAPH/AUDIO VISUAL RELEASE:

I agree that YCM may photograph me and/or record my voice and image, (collectively, "image") and use my image and/or statements for advertising, publicity, display, publication or other promotional purposes. I agree that YCM shall have the unrestricted right to choose the media (print publications, television, radio, Internet, or other media) for display of my image. I warrant that I have not limited the use of my photograph, voice and/or name to the use of any organization or person.

Printed Name _____

Signature _____

Date _____