



## Volunteer Information Sheet/ Waiver

I understand that this is a volunteer position and no compensation is expected for services rendered. I do not hold Mighty Fortress, or the nonprofit responsible for any injuries that I may incur while I am volunteering. I understand I am responsible for my own insurance coverage in the event of personal injury.

Signature \_\_\_\_\_ Date \_\_\_\_\_

### Volunteer Information:

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

E-mail \_\_\_\_\_ Mobile # \_\_\_\_\_

Emergency Contact: First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Mobile # \_\_\_\_\_ Relationship \_\_\_\_\_

Do you have a Valid Driver's License? Yes \_\_\_\_\_ No \_\_\_\_\_

Are you over the age of 18? Yes \_\_\_\_\_ No \_\_\_\_\_ if yes please have parent or guardian sign this form

Volunteers under age 15 may only provide services under the direct supervision of their parent or legal Guardian, or person responsible for the minor volunteer.