

Volunteer Information Collection/Release Form



OPERATION
FOOD
SEARCH

Contact Information

Name	Click here to enter text.
Street Address	Click here to enter text.
City ST ZIP Code	Click here to enter text.
Home Phone	Click here to enter text.
Work Phone	Click here to enter text.
E-Mail Address	
Employer	Click here to enter text.

Have you volunteered with us before

Yes

No

When/How long?

Click here to enter text.

Are you with a group?

Yes

No

Name of Group

Click here to enter text.

Person to Notify in Case of Emergency

Name	Click here to enter text.
Home Phone	Click here to enter text.
Work Phone	Click here to enter text.

Agreement and Signature

I understand I am volunteering my services to Operation Food Search, I hereby release, indemnify and hold harmless Operation Food Search, its officers, employees, successors, assigns, legal representatives, organizers, sponsors and supervisors of its activities, from any and all claims, causes of action and liability arising from or in any way connected with my volunteer participation with Operation Food Search.

I understand I am expressly assuming all risk, including but not limited to all risk of injury, associated with my volunteer participation at Operation Food Search and/or any activity conducted offsite in behalf of Operation Food Search.

I, further grant permission to Operation Food Search to use, without cost or approval, any photographs, videos or audio taken of me while I am volunteering in Operation Food Search activities.

Name (printed)	Click here to enter text.
Signature	
Date	Click here to enter text.