



## VOLUNTEER APPLICATION & WAIVER

Thank you for volunteering to help the Ocean Park Association. Volunteers are the lifeblood of our organization. Please read, complete, and sign the following form.

**Where or how do you see your gifts, talents, or skills being used as a volunteer for the OPA?**

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## VOLUNTEER INFORMATION

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Email: \_\_\_\_\_

## EMERGENCY CONTACT INFORMATION

Name: \_\_\_\_\_  
Relationship to Volunteer: \_\_\_\_\_ Phone: \_\_\_\_\_

**VOLUNTEER AGREEMENT** As a volunteer, I release and hold harmless the Ocean Park Association from any and all claims, costs, suits, actions, judgments or expenses upon any damage, loss or injury to me or to my property which may arise during a volunteer event. I acknowledge that I am fully aware of all risks posed by these volunteer activities and that I have no medical condition that prevents me from engaging in them. I also give permission to be photographed by project partners or the media for use in printed materials, through the internet or through other media outlets. In signing below, I acknowledge that I have read and understand this volunteer agreement.

Signature: \_\_\_\_\_

NOTE: If the volunteer is under the age of 18, a parent or legal guardian must sign.

Parent or Guardian Signature: \_\_\_\_\_