

ADULT EVENT VOLUNTEER FORM

Ages 19 and older

Name of Event	Date of Event		
Volunteer Crew	Date		
Crew Leader	Phone:	Text YES NO?	
<p>In consideration of the opportunity afforded me to assist Rebuilding Together Kansas City (RTKC), in which homes of disadvantaged residents will be repaired by volunteers, I am a volunteer that provides services on a purely charitable and voluntary basis. In light of the aims and purposes of the community service provided by RTKC in organizing this project, I, the undersigned, hereby waive any right or cause of action arising as a result of my participation in any RTKC project from which any liability may or could accrue against RTKC or its officers and directors collectively or individually. Without limiting the generality of the foregoing, I agree that this waiver shall include any rights or causes of action resulting from personal injury to me or damage to my property sustained in connection with my activities while volunteering for RTKC. Further, I agree to hold RTKC, and all people participating in any RTKC project, blameless for any accident while in transport while volunteering for RTKC.</p> <p>I understand that in the case of an illness or injury to myself, an RTKC volunteer will try to phone the emergency contacts provided, and I will allow them to secure medical treatment for those health conditions. If need be, I give permission for the attending physician to provide the proper treatment and to hospitalize if necessary. I, the undersigned, release RTKC, RTKCworkers, donors/supporters/shareholders of RTKC, and anyone participating on behalf of RTKC from all liability in case of illness or injury at all times while I am volunteering for RTKC. If we do not carry health insurance, then RTKCand its participants are not responsible for the expense of any medical treatment received.</p> <p>By signing my name below, I also hereby consent to the use of photographs and/or videos of those identified below and/or the statements attached hereto, including my personal name or the firm name, by Rebuilding Together Clay County and its subsidiary and affiliated companies and their respective dealer and distribution organizations for advertising or publicity in printed, recorded or electronic media. I represent that I am of legal age and that I have authority to give this consent which will remain in effect until revoked by me in writing.</p>			
Print Name	Phone	Text YES NO?	
Address	City	State	Zip
Email	T-Shirt Size S M L XL XXL XXXL		
Emergency Contact Phone	Text YES NO?		
Signature	Date		
Print Name	Phone	Text YES NO?	
Address	City	State	Zip
Email	T-Shirt Size S M L XL XXL XXXL		
Emergency Contact Phone	Text YES NO?		
Signature	Date		
Print Name	Phone	Text YES NO?	
Address	City	State	Zip
Email	T-Shirt Size S M L XL XXL XXXL		
Emergency Contact Phone	Text YES NO?		
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Print Name	Phone	Text YES NO?
Address	City	State Zip
Email	T-Shirt Size S M L XL XXL XXXL	
Emergency Contact Phone	Text YES NO?	
Signature	Date	
Print Name	Phone	Text YES NO?
Address	City	State Zip
Email	T-Shirt Size S M L XL XXL XXXL	
Emergency Contact Phone	Text YES NO?	
Signature	Date	
Print Name	Phone	Text YES NO?
Address	City	State Zip
Email	T-Shirt Size S M L XL XXL XXXL	
Emergency Contact Phone	Text YES NO?	
Signature	Date	
Print Name	Phone	Text YES NO?
Address	City	State Zip
Email	T-Shirt Size S M L XL XXL XXXL	
Emergency Contact Phone	Text YES NO?	
Signature	Date	
Print Name	Phone	Text YES NO?
Address	City	State Zip
Email	T-Shirt Size S M L XL XXL XXXL	
Emergency Contact Phone	Text YES NO?	
Signature	Date	
Print Name	Phone	Text YES NO?
Address	City	State Zip
Email	T-Shirt Size S M L XL XXL XXXL	
Emergency Contact Phone	Text YES NO?	
Signature	Date	