



Address: _____
 City, State, Zip: _____
 Phone: _____
 Email: _____
 DOB: _____

**Special Project/Event Volunteer
 Hold Harmless Agreement**

I, _____ (Name), signify my willingness to serve as an Easterseals Midwest volunteer.

I understand that as a Special Project/Event Volunteer, serving once or very few times for a particular event or purpose for Easterseals Midwest, I will be volunteering my services to Easterseals Midwest. I further understand that the nature of such volunteer activities may involve physical activity, contact with unidentified and unfamiliar persons, and exposure to other risks of injury. Understanding there are risks, both known as well as unforeseen, associated with such volunteer activities, I hereby release, waive, and hold harmless Easterseals Midwest and its employees, officers, directors, volunteers and clients from any and all liability, claims, demands and actions resulting from injuries, both physical and/or mental, or property damage including any injury or damage caused by the negligence or inadvertent acts of any of the parties being released hereunder. The foregoing also includes any liability incurred as a result of being transported to or from any Easterseals Midwest activity.

I understand and agree to adhere to Easterseals Midwest’s policies and procedures including but not limited to those related to abuse and neglect, grievance procedures, confidentiality, corrective action and termination. I am also willing to take any required training as applicable. I agree to submit to any required drug testing and authorize the release of all such test results to the Human Resources department of Easterseals Midwest.

I understand that in order to ensure a safe environment for employees, the people we support and the general public, Easterseals Midwest prohibits the possession, wearing, transporting, storage or presence of firearms or other dangerous weapons at our agency sites, offices, vehicles including personal vehicles used to transport clients and any agency-sponsored event. Possession of a valid concealed weapons permit is not an exemption under this policy.

I understand that Easterseals Midwest may require a criminal background check, personal references, a copy of my social security card, and any information received from the Missouri Family Safety Care Registry before becoming involved in any volunteer activity.

I also grant Easterseals Midwest permission to utilize my picture or image in any photographs, videos or other media for publicity or other purposes without fee and waive any right I may have to such photographs or videos.

I also agree not to consume alcohol or illegal drugs during my volunteer shifts. I understand that this Agreement is applicable to me even if I am an employee of the agency volunteering at this event.

I have read, understand and agree to this Agreement.

Volunteer Signature

Date

If you are under 18 years of age, we must also require the signature of a parent or legal guardian.

Parent/Guardian Name

Relationship to Volunteer

Parent/Guardian Signature

Date

Easterseals Midwest

Date