Studio name _____

Volunteer and event waiver

Sign before your first shift or event. It covers the year.

About you

Your name
First name

Last name

Date of birth (MM/DD/YYYY)

Mobile phone

Email

Emergency contact

Your visit

Event and role

Before you take part

These questions help the staff keep you safe. They aren't medical advice, so check with your doctor about anything you're unsure of. The staff may ask you to sit out if an answer means the activity isn't safe for you today.

Have you had a back, neck or joint injury or surgery in the last year?

☐ Yes ☐ No

What was it, and when?

Do you have a heart condition or high blood pressure?

☐ Yes ☐ No

Tell us more.

Do you have a serious allergy, such as to bee stings, foods, animals or latex?

☐ Yes ☐ No

What are you allergic to, and do you carry medicine for it?

Do you have asthma or another condition that makes hard exercise risky for you?

☐ Yes ☐ No

Do you carry an inhaler or other medicine? Tell us more.

Are you pregnant?

☐ Yes ☐ No

Is there anything else about your health the staff should know before you take part?

☐ Yes ☐ No

Tell us more.

Risks and rules

The risks

Volunteering and events have risks, including:

- Strains from lifting, carrying and setting up
- Cuts and bruises from tools, boxes, tables and tents
- Trips and falls on cords, uneven ground, stairs and wet floors
- Traffic near roads, parking lots and course crossings
- Heat, cold, sun, rain and long hours on your feet
- Crowds, animals and handling food

I understand these risks, and others no one can foresee, and that some remain even when the staff and other guests take care. I choose to take part.

Initials _____

Volunteer rules

- Check in with your coordinator when you arrive and before you leave.
- Wear closed-toe shoes and the gear you're given.
- Lift only what you can handle, and ask for help with anything heavy.
- Use tools, ladders and vehicles only if you've been shown how and asked to.
- Report an injury, a hazard or a lost child to a coordinator right away.

I'll follow these rules and every instruction from the staff. The staff may stop me or ask me to leave if I don't.

Initials _____

I'm a volunteer

I'm volunteering. I'm not an employee, and I'm not paid for this work.

Initials _____

What you agree to

My answers
My answers are true. I'm not impaired by alcohol or drugs, and I'll tell the staff if anything about my health changes before or during my visit.

Initials ☐

Release
To the extent the law allows, I release the business, its owners and its staff from claims for injury, illness or damage that come from the inherent risks of this activity. This release doesn't cover anything the law doesn't let me give up.

Initials ☐

Emergency care
If I'm hurt or become ill, the staff may give first aid and call emergency services. I'm responsible for the cost of any care I receive.

Initials ☐

Photos and video

This waiver covers your visits for one year from the day you sign. The business may ask you to sign again sooner if its rules or this form change.

the studio uses your health answers only to do your appointment safely and to keep the records the law requires. They are never used for marketing or sold. They are stored encrypted, and every time someone at the studio opens them it is logged.

Your signature _____ **Date** _____

Printed name _____

For the staff (For the studio)

Visit details

Booking or group name

Shift

Coordinator

Anything that came up during the visit

Template from Digital Waiver Software https://waivers.greatwork.company/waivers/volunteer
This is a template and general information, not legal advice. Rules differ by state and sometimes by county, so check yours with a lawyer in your state before you use it.