



Volunteer Registration Form

Cleanup Location: _____ Cleanup Date: _____
 Organizer Name: _____ Organizer Contact: _____

IMPORTANT! YOU MUST READ AND SIGN THIS FORM BEFORE TAKING PART IN THE ACTIVITY.

The participants signed below agree that _____ will not be liable for:

- Any injuries sustained by the participants
- Any loss or damage to property owned by, or in the possession of, the participants
- Any acts or omissions, negligence or fault of any person participating in the activity

* Please inform the Eorganizers of any pre-existing medical condition[s] that might affect your participation so you can be allocated appropriate tasks.

* If volunteer participant is under 15 years of age: I certify that I am the parent/legal guardian and she/he has my consent to participate in the activity.

Full Name	Signature	Email / Phone