



### Volunteer Work Agreement Waiver

As a volunteer of United Against Poverty, I hereby agree to hold harmless and waive any and all claims or causes of action against United Against Poverty arising out of any cause whatsoever, including but not limited to claims arising out of negligence or intentional conduct of its employees or agents.

I attest that I am physically fit and prepared to perform the tasks assigned to me as a United Against Poverty volunteer.

I further agree to use my personal insurance as the primary provider in the event of injury due to my work as a volunteer of United Against Poverty.

I shall not operate a personal vehicle for volunteer activities unless I have at least the minimum amount of liability insurance as required by Florida law.

United Against Poverty is not responsible for loss or damage to volunteer's personal property.

I grant permission to allow my picture to be used in marketing materials created by United Against Poverty.

I understand that as a volunteer on the United Against Poverty campus that I will follow the established dress code. This means no open toed shoes, spaghetti straps or tank tops, leggings, or inappropriate/offensive clothing.

I have read, understand, and agree to the above policies and safety procedures and waivers:

**Group Name:** \_\_\_\_\_

**Volunteer Name:** \_\_\_\_\_

**Volunteer Email:** \_\_\_\_\_

Would you like to receive monthly volunteer emails?                      Yes                      No

**Volunteer signature:** \_\_\_\_\_ **Date** \_\_\_\_\_

*(If under 18, signature of parent or legal guardian is required.)*

**Parent/Legal Guardian Name:** \_\_\_\_\_

**Parent/Legal Guardian Signature:** \_\_\_\_\_