

# Teen Volunteer Releases:

Turn in signed form IMMEDIATELY BEFORE your training meeting.

Name: \_\_\_\_\_

Birthdate (MM/DD/YY): \_\_\_\_\_

I understand that if I am not able to volunteer at my scheduled time, I should give as much notice as possible (at least 24 hours), immediately updating my online SignUp so that someone else has the opportunity to fill in. I will check for problems as soon as I receive my shift reminder email. If I cannot give 24 hour notice, I will also call the library at 398-2711 so that the printed sign in sheet can be updated. I understand that those who are habitually absent will forfeit all remaining volunteer shifts. If I would like service hour forms filled out, I will supply the paper form at my training meeting. I understand that Mason Public Library staff is not permitted to provide transportation for volunteers, including to and from the Mason Community Center.

Volunteer signature: \_\_\_\_\_

Date: \_\_\_\_\_

Parent's signature if student is under 18: \_\_\_\_\_

Date: \_\_\_\_\_

## Waiver of Liability and Release:

In consideration of participation in the program or activity offered by the Mason Public Library, I, the undersigned for myself and/or as the parent/guardian of the Minor named below, agree to indemnify and hold the Mason Public Library harmless and hereby waive, release and discharge any and all claims for damage, for death, personal injury, bodily injury or property damage which I and/or the Minor may have or which hereinafter may accrue to me and/or the Minor against the Mason Public Library, its Trustees, employees, agents, volunteers, independent contractors, and instructors from and against any liability arising out of or connected in any way with my and/or the Minor's participation in this class or activity, even though that liability may arise out of negligence or carelessness on the part of the person or entities mentioned above.

I understand that accidents and injuries can arise from participation in this program or activity, knowing the risks, nevertheless, I hereby agree to assume those risks on behalf of me and/or the above named Minor and to release and to hold harmless all of the persons or entities mentioned above whom (through negligence or carelessness) might otherwise be liable to me and/or the above named Minor (or my/our heirs or assignees) for damages. It is further understood and agreed that this waiver, release and assumption of risks has been freely entered into and is to be binding on my/our heirs and assigns.

I have read and agree to the registration and program policies. Further, I agree to allow use of my image and/or that of the named minor, which may be captured through video, photo, digital camera or other media, for the Mason Public Library promotional materials and publications. By my signature below, I acknowledge that I have read this document and understand its contents.

Volunteer signature: \_\_\_\_\_

Date: \_\_\_\_\_

Parent's signature if student is under 18: \_\_\_\_\_

Date: \_\_\_\_\_

## Photo/Video Release:

Address: \_\_\_\_\_  
Street City State Zip

I hereby give my permission to Mason Public Library to use any photos or video taken of myself to promote library programs. The photos and video material will only be used for library promotional purposes.

Volunteer signature: \_\_\_\_\_

Date: \_\_\_\_\_

Parent's signature if student is under 18: \_\_\_\_\_

Date: \_\_\_\_\_