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## SOCIETY OF ST. ANDREW VOLUNTEER REGISTRATION & WAIVER (REQUIRED)

Please fill out a Registration & Waiver form before volunteering at an event with the Society of St. Andrew - once each calendar year. A parent or guardian must fill out the form for anyone under the age of 18.

**Required Waiver:** In the event this person suffers any illness or accident requiring emergency hospitalization, medication, or surgery while participating in this gleaning, on the recommendation of the doctor, after consultation with the adults in charge of this event, I hereby give my permission for any medical treatment which may be deemed necessary and reasonable under the circumstances, understanding that the gleaning coordinator or other responsible person will contact me at the earliest possible moment. I fully understand and comprehend that reasonable care will be exercised by the adult staff for this gleaning event to protect the safety of those involved.

Photos, videos, and other images in which I appear that are taken during gleanings may be used by the Society of St. Andrew for news coverage, newsletters, reports, displays, and for other print, broadcast, web, or electronic news or promotional purposes.

Safety is of paramount importance in a gleaning event. For the protection of all involved, this disclaimer is necessary: I do not hold the board, members, or employees of the Society of St. Andrew (SoSA,) or any volunteers liable for injury, bodily harm, accidents, or death of myself/my child during events sponsored by the Society of St. Andrew. Neither will I hold the person(s) who owns and/or operates the property from which we glean, salvage, or to which we deliver food, liable for accidents, injury, or death during the gleanings or other SoSA events.

Full Name \_\_\_\_\_

Email \_\_\_\_\_

☐ Check if under age 18.

If Parent or Guardian: Full Name \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

ZIP code \_\_\_\_\_

Phone \_\_\_\_\_

☐ Check if you have allergies & conditions and then list \_\_\_\_\_

Group, Organization, or Church \_\_\_\_\_

☐ I have read and agree to the waiver statement. \_\_\_\_\_

Signature (required)