



Youth Volunteer Agreement

Last Name	First Name	Middle Initial
-----------	------------	----------------

Parent or Legal Guardian's Name (First & Last)

School or Group Affiliation

Primary Phone	Additional Phone
---------------	------------------

E-mail Address

Mailing Address	City	State	Zip Code
-----------------	------	-------	----------

In Case of Emergency, please contact:

Name	Phone	Relationship
------	-------	--------------

Name	Phone	Relationship
------	-------	--------------

Please describe any medical conditions requiring special precautions or treatments. Include medicinal allergies. Include medications and doses you may require:

In the event of a medical emergency, the undersigned authorizes Tilth Alliance and their designated agent to authorize such medical assistance as they determine to be necessary.

The undersigned authorizes any licensed physician and/or medical facility to provide any medical/surgical care and/or hospitalization, including anesthetic, which they determine necessary or advisable, pending receipt of a specific consent from the undersigned.

Emergency Medical Treatment Consent: Yes _____ No _____



Liability Release and Hold Harmless Agreement

I wish to participate as a volunteer at Tilth Alliance. I understand there may be some risk associated with this activity and I am participating at my own risk. I, individually, and/or parent or guardian of a volunteer, hereby release and hold harmless Tilth Alliance for accidents, damage, death, illness, or injury to me suffered during or in connection with my volunteer work with Tilth Alliance.

Photo and Content Release

I grant to Tilth Alliance, and its successors and assigns, the right to use and publish my photograph, video or voice recordings, or likeness/appearance, with or without my name, on a perpetual basis in any medium or format, for the promotional and educational purposes of Tilth Alliance and the artist who recorded or created the foregoing on behalf of Tilth Alliance. I hereby release Tilth Alliance from all claims and demands that I may have, including without limitation those based on copyright, libel, slander, violation of privacy or publicity or similar rights, arising out of or in connection with the exercise of the rights authorized hereunder.

If I am generating any content for Tilth Alliance, I understand that it is policy of the organization that all content (written, audio, video, etc.) generated by volunteers of Tilth Alliance should become the sole property of Tilth Alliance. In the event that a volunteer takes issue with this policy, Tilth Alliance extends the opportunity of concurrent ownership of content to its volunteers.

Select to opt-out of photo-release

Volunteer Signature: _____ Date: _____

Guardian Signature: _____ Date: _____