

# Volunteer Activity Assumption of Risk Form

Thank you for your willingness to volunteer. Please read the information below carefully and complete this form before participating in any volunteer activities.

## Volunteer Details

Full Name

Enter your full name

Address

Enter your address

Phone Number

Enter your phone number

Email

Enter your email address

## Assumption of Risk

I acknowledge that my participation as a volunteer in the activities organized by **[Organization Name]** is voluntary. I understand that these activities may involve certain risks, including, but not limited to, physical or emotional injury, illness, property damage, and other unforeseen hazards. I hereby assume all risks associated with my participation, whether known or unknown to me.

I certify that I am physically fit and capable of participating in the activities and have not been advised otherwise by a qualified medical professional. By signing this document, I release and hold harmless **[Organization Name]**, its employees, and affiliates from liability for any harm or injury that may result from my participation, except where prohibited by law.

Emergency Contact Name

Enter emergency contact name

Emergency Contact Phone

Enter emergency contact phone

Volunteer Signature

Type your full name as signature

Date

## Important Notes

- This form must be completed and acknowledged by each volunteer before participating in any activities.
- Volunteers under 18 should have a parent or legal guardian sign this form.
- Keep copies of all assumption of risk forms for your records and legal compliance.
- Assumption of risk forms do not waive rights in cases of gross negligence or intentional harm.
- The content of this document may need adaptation to comply with local laws and requirements.