



Volunteer Information and Release - Minor

Grace Klein Community, Inc. 1678 Montgomery Highway #104, Birmingham, AL 35216 205-390-2211

Name:		
Address:	City:	Zip Code:
Phone:		
E-mail:		
Ways you enjoy serving:		
Volunteer availability:		
Do you attend a church? Is so, which o	:hurch?	
Languages you speak:		
Waiver for Volunteer Services		
As the parent or guardian of a minor of myself and on behalf of my minor child employees from any liability of personal volunteer activities for Grace Klein Con assuming all risks of this volunteer wouthat we elect to do. We also understan qualify him/her as an employee for any workers' compensation benefits if he/s	I, hereby release Grace Klein Com al injury, loss or damage to persor nmunity, Inc. I agree, for my mind rk, and that there is a possibility o d and acknowledge that my child's y purpose. We also understand tha	munity, Inc., its officers and hal property associated with or child and myself, that we are if injury that may result from work is status as a volunteer does not at my child cannot qualify for
In addition, we hereby release the Join Restored Sight Christian Church, Fresh Titusville Development Corporation, Tit Klein Community) and all of the memb or damage to personal property associated and relief efforts.	Anointing House of Worship, Five tusville Food Pantry, Open Door Mi ers' officers and employees from a	Points West Business Alliance, inistries International, and Grace any liability of personal injury, loss
We acknowledge that we understand the release are made to the maximum extended this document under our own from the release the opportunity to serve we will be acknowledged that we have a serve we have a se	ent permissible under applicable la ree will, and that we accept as valu	aw. We acknowledge that we have uable consideration for this waiver
Parent/Guardian Name (Print & Signati	ure)	Date:
Parent/Guardian Name (Print & Signature of both parents is required	ure)	Date:

Minor Name: (Print and Signature) ______ Date: _____