



# Thrive in Southern New Mexico DAY OF CARING VOLUNTEER FORM SEPTEMBER 8th, 2017

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

Address: \_\_\_\_\_ City/State: \_\_\_\_\_ Zip: \_\_\_\_\_

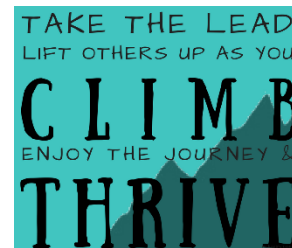
Personal email: \_\_\_\_\_

Please "x" all below that you can participate in and list what you can do:

| JOB                     | "x" | I CAN DO |
|-------------------------|-----|----------|
| Lawn Care               |     |          |
| Cleaning                |     |          |
| Wood Cutting            |     |          |
| Packing/Unpacking Boxes |     |          |
| Tree Trimming           |     |          |
| Repair                  |     |          |
| Painting                |     |          |
| Miscellaneous           |     |          |

What Tools can/will you bring? \_\_\_\_\_

➤ Volunteer T-Shirt Size:      S      M      L      XL      XXL



**For Office Use Only**

Work Zone # assigned: \_\_\_\_\_

Volunteer Contact Date: \_\_\_\_\_

Zone Leader Confirmed Volunteer's Assignment: \_\_\_\_\_



# Day of Caring Volunteer Waiver

Name \_\_\_\_\_ Phone \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Day Phone \_\_\_\_\_

**LIABILITY RELEASE:** I hereby release, indemnify and hold harmless Thrive in Southern New Mexico, the organizers, sponsors and supervisors of all its activities, from any and all liability in connection with any injury (including any injury caused by negligence), in conjunction with the Day of Caring, Friday, September 8, 2017.

Signature \_\_\_\_\_ Date \_\_\_\_\_

**COMMUNICATIONS RELEASE:** I hereby give to Thrive in Southern New Mexico, to its nominees, agents and assigns, my free and unlimited consent and permission, waiving all claims for any compensation by reason thereof or for damages by reason thereof, to use, publish, republish or exhibit in the furtherance of its work, with or without identification of me by name, the photographs, videos, or statements taken on this day, Friday, September 8, 2017 and to disseminate statements referring to me in conjunction therewith if Thrive in Southern New Mexico so desires and to authorize any newspaper, company or other organization to use, publish, republish or exhibit said photograph with or without identification of me by name and to publish or disseminate statements referring to me in conjunction therewith in the promotion of Thrive in Southern New Mexico and any of its fund campaigns or any of its activities.

Signature \_\_\_\_\_ Date \_\_\_\_\_