



Volunteer Application

Date of Application: _____

Name: _____

Address: _____

City, State, Zip: _____

Main Phone: _____ Cell: _____

E-mail: _____

Emergency Contact: _____

Phone: _____ Cell: _____

Availability? Weekdays Weekends Morning Afternoon Evening

Are you aware of any condition that would prohibit or limit you from performing your duties? no yes Explain: _____

Volunteer Opportunities: Clerical Short Term Special Projects (as needed)

Training Advocacy Marketing Networking

Special Events: _____

Committees: _____

Transportation: Able to drive? yes no

Valid Drivers license: Type: _____ State & DL #: _____

List special skills: _____

Release of Liability

In consideration of my desire to serve as a volunteer for the Greater Hernando County Chamber of Commerce (Chamber), I hereby assume all responsibility for any and all risk of property damage or bodily injury that I may sustain while participating in any voluntary effort with the Chamber. Further, I, for myself and my heir, executors, administrators and assigns, hereby release, waive and discharge the Greater Hernando County Chamber of Commerce and its officers, directors, employees, agents and volunteers of and from any and all claims which I or my heirs, administrators and assigns ever may have against any of the above for, on account of, by reason of or arising in connection with my participation as a volunteer, and hereby waive all such claims, demands and causes of action. Further, I expressly agree that this release, waiver and indemnity agreement is intended to be as broad and inclusive as permitted by the State of Florida, and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

I currently have no known mental or physical condition that would impair my capability for full participation as intended or expected of me. Further, I have carefully read the foregoing release and indemnification and understand the contents thereof and sign this release as my own, free act.

Signature: _____ Date: _____