



By signing below, I, the volunteer (or volunteer's legal guardian), acknowledge that entry into this agreement ("Agreement") is in consideration of my participation as a volunteer, and confirm my understanding and agreement to the following:

Safety and Conduct

I will comply with the Fairfield Programming Association's volunteer policies, safety rules, conduct expectations, and other directions. I understand that the Fairfield Programming Association does not tolerate bullying, harassment, threatening behavior, or violence of any kind.

Volunteer Not an Employee

I understand that I am not an employee of the Fairfield Programming Association and will not be paid for participation as a volunteer or be eligible for participation in the Fairfield Programming Association's benefit plans.

Awareness and Assumption of Risk

I assume and accept any and all risks of injury, illness, death, and property damage or loss that may arise from my presence at the Fairfield Programming Association facilities or participation as a Fairfield Programming Association volunteer.

Waiver and Release of Claims

I waive and release the Fairfield Programming Association and its directors, employees, and other volunteers from any and all claims and liabilities arising from my participation as a Fairfield Programming Association volunteer, including, without limitation, claims in respect of death, illness, or injury to my person or property. I will not sue the Fairfield Programming Association on the basis of these waived and released claims.

Disclosure of Medical Conditions

I understand that I am solely responsible for knowing my own physical condition and making my own decision about volunteering. I have disclosed all medications and conditions relevant to my participation to Fairfield Programming Association staff, including, without limitation, chronic conditions such as asthma, allergies, seizures, or diabetes. I understand that the Fairfield Programming Association needs such information because some medication side effects or medical conditions could affect my safety or that of others at the Fairfield Programming Association. I consent to the Fairfield Programming Association sharing this information with health professionals or first responders should I become ill or injured while at Fairfield Programming Association facilities.

Medical Care Consent

I authorize the Fairfield Programming Association to provide me first aid, emergency medical assistance, and transportation. I understand that the Fairfield Programming Association is not obligated to provide this care. I also understand that I am solely responsible for any costs related to my medical treatment and transport, and that the Fairfield Programming Association does not provide health, medical, disability, or other insurance coverage for me.

Confidentiality

I may have access to the Fairfield Programming Association's confidential information. I will hold any such information in confidence and not disclose or use it except as the Fairfield Programming Association expressly authorizes.



Assignment of Work Product

I grant full rights to the Fairfield Programming Association in any reports, brochures, website content, photos, images, videos, or other materials or works I may create in the course of volunteer activities, and any intellectual property rights in or derivatives of such materials.

Use by the Fairfield Programming Association of My Name and Image

I consent to use by the Fairfield Programming Association of my image, voice, name, and story, and of images of any works I may create as a volunteer, in the Fairfield Programming Association’s digital and print promotional, fundraising, educational, and other communications. The Fairfield Programming Association may use them without obtaining my approval or paying me for such use. I waive any legal claims related to such use, including claims relating to copyright or rights of publicity or privacy.

My checking this box means that I do not wish to agree to this consent.

Applicable to All Volunteer Work

I understand this Agreement applies throughout the duration of my participation as a Fairfield Programming Association volunteer.

General Provisions

This Agreement will run in favor of each of the Fairfield Programming Association and its directors, employees, and other volunteers, and will bind my heirs, next of kin, and legal representatives. If any provision of this Agreement is found to be unenforceable, the other terms will remain effective.

I have read this Agreement and understand its terms. I sign it freely and voluntarily.

Signature

Print Name

Print Volunteer Position

Date