

**North Hunterdon-Voorhees Regional High School District
Volunteer Disclaimer/Authorization Form**

Name _____
Last First M.I.

Mailing Address _____
Street Township State Zip Code

Program/Club/Activity/Sport: _____ (hereinafter "Activity")

Emergency Contacts

1. Name _____ Phone Number _____

2. Name _____ Phone Number _____

Physician _____ Phone # _____ Dentist _____ Phone # _____

PERMISSION/AUTHORIZATION FOR EMERGENCY TREATMENT & RELEASE

I understand that volunteering in conjunction with the Activity named above involves the potential for injury. I acknowledge that even with the best coaching, instruction and monitoring, as well use of the most advanced protective equipment and strict observance of rules, injuries can be so severe as to result in total disability, paralysis or even death. By signing this form, I indicate that I have read and understand this warning and am volunteering in conjunction with the above named Activity by my own free will.

I hereby give permission for emergency medical treatment by a team physician, school nurse, certified athletic trainer and/or allied medical personnel for conditions arising out of or in regard to my volunteering in conjunction with the above named Activity and/or any related activities. This may include, but not be limited to, initial diagnostic X-rays and other procedures as the attending physician may deem necessary for the preservation of health.

I give permission for the emergency contact names, including my physician and dentist, contained on this form to be shared with appropriate staff, coaches, transportation personnel and emergency and/or medical personnel when necessary for my safety and welfare.

I agree to release and hold harmless the North Hunterdon-Voorhees Regional High School Board of Education and its employees and representatives ("Board"), from any and all claims, demands, actions, causes of action, costs, suits and liabilities of any kind or character whatsoever, known or unknown, suspected or unsuspected, in law or in equity, which I might hereafter have against the Board, stemming from, or in regard to, my volunteering in conjunction with the above-named Activity and any related activities. This Release shall bind myself and my successors and assigns, and shall inure to the benefit of the Board.

SIGNATURE OF VOLUNTEER _____ **DATE** _____