

Volunteer Opportunity Risk Acknowledgment Form

Full Name

Volunteer Opportunity/Role

Date

Risk Acknowledgment

I acknowledge that participation as a volunteer in the above-named opportunity may involve certain risks to my health, safety, or personal property. I accept responsibility for understanding and managing these risks to the best of my ability.

Liability Release

By signing below, I confirm that I have been informed of and understand the potential risks involved. I voluntarily assume these risks and release the organization from any liability for injury or loss arising out of my participation.

I have read, understood, and agree to the above statements.

Volunteer Signature

Date