

Nonprofit Volunteer Assumption of Risk Form

Full Name

Address

Phone Number

Email Address

Assumption of Risk

I understand that volunteering for [Nonprofit Organization Name] is a potentially hazardous activity. I acknowledge and accept that by participating as a volunteer, I may be exposed to various risks and hazards, including injury, illness, or property damage.

I hereby voluntarily assume all risks of loss, damage, or injury, whether known or unknown, that may be sustained while volunteering. I agree to release and hold harmless [Nonprofit Organization Name], its directors, officers, employees, and agents from any and all liability arising from my volunteering activities, to the fullest extent permitted by law.

I certify that I am physically capable of participating as a volunteer and will notify [Nonprofit Organization Name] of any changes to my health status that could affect my ability to safely perform volunteer work.

Initials (to confirm agreement)

Emergency Contact Name

Emergency Contact Phone

Volunteer Signature

Date

Parent/Guardian Signature (if volunteer is under 18)