



# Volunteer Application and Liability Release

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**INFORMATION**

Last name	First name
Street Address	City, State, Zip
Home Phone	Cell Phone
Work Phone	Email
	<input type="checkbox"/> Email <input type="checkbox"/> Home Phone <input type="checkbox"/> Work Phone <input type="checkbox"/> Cell Phone
Birth Date	How would you like us to contact you (check all that apply)

**VOLUNTEER INTERESTS**

Position applying for: \_\_\_\_\_

Please tell us why you would like to volunteer with WILD COAST:

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Please tell us about any previous experience related to the type of volunteer work you would like to do:

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Do you speak any languages other than English?  Yes  No

If Yes: Language: \_\_\_\_\_  
Ability: Beginning Intermediate Advanced

Language: \_\_\_\_\_  
Ability: Beginning Intermediate Advanced

Please indicate which locations you would be willing to travel (check all that apply):

- Imperial Beach
- East San Diego
- Other \_\_\_\_\_
- La Jolla
- North San Diego
- Baja, Mexico
- South San Diego

### AVAILABILITY

<input type="checkbox"/> Weekends	<input type="checkbox"/> Daytime	<input type="checkbox"/> Seasonal
<input type="checkbox"/> Weekdays	<input type="checkbox"/> Evenings	<input type="checkbox"/> Other _____

### EMERGENCY INFORMATION

In case of emergency, I authorize WILD COAST to notify the contacts listed below.

\_\_\_\_\_  
Name Phone number Relationship to you

\_\_\_\_\_  
Name Phone number Relationship to you

### ANY COMMENTS OR QUESTIONS?

\_\_\_\_\_  
\_\_\_\_\_



## **Volunteer Application and Liability Release**

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### **WAIVER OF LIABILITY**

I hereby waive any right or cause of action arising as a result of my participation in WiLDCOAST's volunteer projects, including transportation if provided, from which any liability may or could accrue against WiLDCOAST or the officers, volunteers, agents, employees or assigns, collectively or individually. Without limiting the generality of the foregoing, I agree that this waiver shall include any rights or causes of action resulting from personal injury to me or damage to my property sustained in connection with my activities for WiLDCOAST's service projects. My signature to this volunteer liability release attests to my intent to hold harmless and release from all liability WiLDCOAST or any of its officers, agents, volunteers, employees or assigns, from all acts which are related to the normal performance of required and implied duties.

I also hereby authorize and consent that WiLDCOAST has the right to copyright, publish, use, sell or assign any and all photographic pictures, videotapes and/or sound recordings taken or made of me in which I may be included in whole or part. I grant permission to WiLDCOAST to allow these images and/or recordings to be put to legitimate use at their discretion. I relinquish all rights, title or interest to any furnished products, reproductions or facsimiles.

By signing this waiver I agree to the terms and conditions of WiLDCOAST as stated on this form. My signature, whether original, by fax or any other electronic means, is valid as if it were an original signature.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Print Name \_\_\_\_\_

Please fax completed application to 619-423-8488. Thank you.