



Zellmer Wellness Foundation

2014 Volunteer / Registration Form / Release of Liability / Parental Consent

Parent/Legal Guardian is required to give consent to minors under the age of 18 to participate in any ZWF event.

Volunteer name: _____ Age (if under 18) _____

Address: _____

City: _____ State: _____ Zip: _____

Email: _____

Home phone: _____ Cell phone: _____

Parent/Legal Guardian Name (if volunteer is under age 18): _____

Comments / Limitations / Restrictions / Disabilities: _____

My child is interested in working the following events:

Circle desired times

JUST FOR THE HEALTH OF IT

Thursday, 6/12/14

6:00pm-9:00pm

Spaghetti Dinner Packet Pickup

Friday, 9/26/14

4:00pm-7:00pm
7:00pm-10:00pm

TRICK OR TROT 5/10K

Saturday, 9/27/14

6:00am-10:00am

MONSTER MASH DASH

Saturday, 9/27/14

8:00am-11:00am

I am the parent or legal guardian of a minor child, _____, who wishes to participate as a volunteer in the 2014 ZWF event. I consent to the child's participation in the ZWF event. I for myself and that child, and for each of our personal representatives, executors, administrators, heirs, successors and assigns (related parties) also release and discharge the Zellmer Wellness Foundation, NFP, The City of Geneva, The County of Kane and all sponsors of the ZWF 2014 events and each of their affiliates, directors, officers, trustees, officials, members, employees, volunteers, agents, attorneys, successors and assigns all referred to as Releases from all liability for any injury, damages, death, property damage or other loss that may occur in any way connected with that Child's participation in or travel to or from the ZWF 2014 event whether caused by any of the releases' negligence or any other acts or omissions. The foregoing release is intended to be as broad and inclusive as permitted under Illinois law. If any of the foregoing release is held invalid so that any of the claims concerning any of the liabilities released above may be pursued, I further agree for myself, the minor child and related parties that any such claims shall upon the request of any of the releases, be resolved by final and binding arbitration administered by and according to the then existing Rules of Practice and Procedure of the American Arbitration Association (AAA). If any portion of this agreement is held invalid, the balance of this agreement will continue in full force and effect. I have carefully read this agreement, know its contents and sign it voluntarily.

Signed: _____ Date: _____

Would the Volunteer like PFAC to provide a letter recognizing his/her volunteer hours for credit for High School or other volunteer programs (i.e. GHS GIVE hours)? Y / N