SUMMER SKATE JAM

Volunteer Waiver, Release of Liability & Photo/Video Consent

VOLUNTEER INFORMATION

Name _____ **Date of Birth** _____ **Age** _____

Address _____ **Phone** _____

Email _____ **Emergency Contact** _____ **Emergency Phone** _____

Volunteer Role / Assigned Area _____ **Shift Date(s)** _____

VOLUNTEER CONDUCT & SAFETY

- ☐ Follow all event lead and staff instructions
- ☐ Wear volunteer badge/shirt if provided
- ☐ Treat participants, staff, and guests with respect
- ☐ Report injuries or incidents to the event lead immediately
- ☐ No drugs or alcohol permitted on site
- ☐ Helmet and pads recommended when on the riding surface

ASSUMPTION OF RISK

I understand that volunteering at a skate event held on or near a skatepark involves inherent risks, including falls, collisions, equipment failure, serious injury, or death, whether or not I am riding. I voluntarily assume these risks. **Initial:** _____

RELEASE OF LIABILITY

In consideration of being permitted to volunteer, I release and hold harmless The Carver Society, its directors, officers, volunteers, sponsors, and affiliates, event staff, the City of Akron, Akron Skatepark, and associated property owners from claims arising from my participation, except as prohibited by Ohio law. **Initial:** _____

MEDICAL AUTHORIZATION & BACKGROUND CHECK

If emergency care is needed and I, or my emergency contact, cannot be reached, I authorize emergency medical treatment on my behalf. I understand a background check may be required for volunteer roles involving direct supervision of minors, and I consent to one being conducted if applicable. **Initial:** _____

PHOTO & VIDEO RELEASE

I authorize The Carver Society to use photographs or video of me for its website, social media, printed materials, fundraising, and promotional marketing, without compensation.

- ☐ Yes, I grant permission to use my photo/video
- ☐ No, I decline — please do not use my photo/video

SIGNATURES

By signing below, I confirm I have read this waiver and understand its terms. If the volunteer is under 18, the parent/guardian signature confirms consent to their participation.

	Signature	Date	Printed Name
Volunteer			
Parent/Guardian			

This document is a general community event waiver intended for Ohio events and is not legal advice. Consider review by an Ohio attorney before repeated use.