

United Way of Southeast Minnesota Safety & Liability Waiver

United Way of Southeast Minnesota provides services in a manner that takes into consideration the needs of our community, while maintaining the safety of our staff and volunteers.

Please read and agree to the volunteer safety following protocols:

- ☐ I will practice safe heavy lifting techniques including bending hips and knees to squat down to the load, keeping the load close to the body, and straightening legs to lift.
- ☐ I will not volunteer if I have symptoms or have any reason to believe I could expose other volunteers to a contagious illness or virus.
- ☐ I will wear comfortable clothes, take breaks as needed, drink plenty of water and/or otherwise stay hydrated during my volunteer shift.

I, _____, have read and agree to practice the above protocols during my volunteer shift with United Way of Southeast Minnesota, and I hereby assume all responsibility for any and all risk of property damage, bodily injury, or illness that I may sustain while participating in any voluntary projects, disaster relief effort, or other activity of any nature, including the use of equipment and facilities of United Way of Southeast Minnesota.

Full Name _____

Phone _____ Email _____

☐ I agree to be contacted by United Way of Southeast Minnesota via Email

Emergency Contact _____ Phone _____

Volunteer Signature _____ Date _____

If this release is obtained from a presenter under the age of 18, then the signature of that presenter's parent or legal guardian is also required.

Parent's Signature _____ Date _____

United Way of Southeast Minnesota Volunteer Photo Release

I give United Way of Olmsted County permission to use my name and/or photo in marketing materials and on social media:

☐ Photo ☐ Name ☐ None

Signature of Volunteer

Date of Signature

Signature of UWSEM Staff

Date of Signature

*United Way of Southeast Minnesota will have stickers available to identify those who do not wish to be photographed