



Volunteer Policy, Safety & Injury Release

Consent is required to volunteer

INJURY RELEASE:

As a volunteer working at Christmas Storybook Land (CSBL), I hereby assume full and complete responsibility for any injury, damage, or accident which may occur during my participation in this event or while on the premises of this event. I hereby release, acquit, discharge and hold harmless Christmas Storybook Land of Albany, its affiliated individuals, any event sponsors, including any of its parties, agents, or successors and assigns from any and all claims, demands, damages, costs, attorney's fees, liabilities and claims of any nature arising from or in any way connected with Christmas Storybook Land.

VOLUNTEER POLICIES:

- CSBL may use any photographs, recordings or any other media of this event for legitimate purpose.
- CSBL has the right to terminate participation of any volunteer without cause or explanation, and CSBL shall have no liability therefore.

By signing this form, I am indicating that I am at least 18 years old, have read and understood this consent form and agree to the Injury Release and Volunteer Policies as stated above.

Printed Name

Business or Organization Affiliation

Address _____ City _____ Zip Code _____

Email _____ Phone _____

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I may be interested in volunteering with Christmas Storybook Land and would like to receive emails about future opportunities.

CSBL Youth & Public Safety Policy

Since Christmas Storybook Land is a public event that involves youth, the following questions must be answered to promote a safe environment for our participants. Check all that apply to you.

- ☐ I'm required to register with any state as a sex offender.
- ☐ I have been convicted of a crime involving children.
- ☐ I have been convicted of a crime involving drugs or alcohol in the past 5 years.
- ☐ I have been convicted of a crime involving interpersonal violence.
- ☐ I have been convicted of a crime involving theft, fraud, or other dishonesty within past 5 years.
- ☐ None of the above apply to me.

If you have selected any option other than "None of the above", please explain the circumstances that you wish for CSBL to consider in determining whether to allow you to be a volunteer.

Signature

Date

List any minors (under 18) who are with you:

Name

Age

SUBMIT THIS FORM AT THE EVENT