



THRIVE

Music. Art. Drama. Recreation.

Sr. Staff Volunteer Registration Form

LAST NAME _____ First Name _____

Address _____

City _____ State _____ Zip _____

Home Phone _____ Email _____

Cell Phone _____ Circle if you are a member: YMCA ZOO

Do you attend church? Yes No If yes, which one? _____

How did you hear about THRIVE? _____

Name of students involved in THRIVE _____

Shirt size: Youth – S M L Adult – S M L XL XXL (please circle one)

List all special considerations, allergies and/or restrictions needed: _____

EMERGENCY CONTACT INFORMATION:

Please give the name of someone who can be reached in an emergency.

This information must be filled in before application will be accepted.

Name _____ Phone Number _____

Relationship _____

Performance/Publication/Media Rights Release - Please check each box

- () I understand that I am required to attend all performances and any additional rehearsals that may be scheduled.
- () I permit THRIVE to use any photographs, video images and sounds, and/or audio sounds of me for the purpose of promoting THRIVE programs. I forfeit the right to be compensated for these materials.
- () I understand that I am expected to be on all "Adventure" activities and I am responsible for paying my own admission/transportation costs.

The above information is correct to the best of my knowledge

If you understand and agree with what you have read, please sign your full name on the line below.

Signature

Date

Volunteer Opportunities: (circle all that you are interested in)

Circle which age group you would most like to work with: K-3 4-6 6-8 9-12

Areas with kids:

Devotions
Recreation
Art

Drama
Choreography
Tech Team

Drive to activities: my car holds # _____ passengers

Areas without kids:

Hospitality
Preparing/Serving Snacks
Help setting things up
Help breaking down/cleaning up



Staff - Waiver of Liability

In Consideration of the THRIVE MINISTRY of Woodhaven Community Church, a not for profit church, arranging and permitting _____ (PARTICIPANT) to attend and participate in all related events, I hereby waive all rights which I may now have or which may accrue in the future against Woodhaven Community Church, its respective chapters, directors, officers, employees, and members (collectively the "WCC Representatives"), and I hereby release and discharge WCC and WCC Representatives from, and agree to indemnify and hold WCC Representatives harmless from and against all liability for any and all actions, damages, causes of action, suits, losses, expenses, claims, demands, damages and judgments (collectively the "Losses and Claims"), which I, my spouse, family members, children, invitees, heirs, executors, administrators, successors and assignees ever had, now have or hereafter can, shall or may have resulting from or arising in connection with my travel to, attendance at or participation in WCC events. I acknowledge that certain legal rights against WCC or WCC Representatives may be available to me now or in the future as a result of any Losses and Claims, and that by executing this waiver and release of liability, my spouse and I are forever relinquishing those rights against WCC and WCC Representatives. I acknowledge that no promises, representations, or affirmations of fact were made to me by WCC or WCC Representatives concerning the safety of the event, the security precautions taken in sponsoring the event, the relative safety or danger associated with traveling to the event or participating in any activity, academy, event or outing related to, associated with or connected in any way to the event and affirm that I have read and understand the forgoing provisions of this waver and release of liability and accept the terms of this waiver and release of liability as a condition to my attendance at the event.

Minor (Under 18) Authorization

Above Student is allowed to ride in boat: Yes No

Above Student is allowed to participate in swimming: Yes No

Student's Swimming Level is:

Beginner Moderate Intermediate Advanced

NOTE: BEGINNERS WILL BE ASKED TO REMAIN ON WATER'S EDGE OR WEAR LIFE VEST BEFORE ENTERING BODY OF WATER

Student is able to tread water for 10 minutes?? Yes No

I give permission for my son/daughter to attend Thrive Ministry or WCC functions and to be transported to any location they have signed up to go. I have read the above Waiver of Liability and agree to its provisions. In addition, I give permission for my son/daughter to receive any medical treatment deemed necessary by a physician.

I have read the above Waiver of Liability and agree to its provisions.

Parent Signature: _____ Date: _____

Parent Name Printed: _____

Relationship to Minor: _____

Adult (Over 18) Authorization:

My Swimming Level is:

Beginner Moderate Intermediate Advanced

I am able to tread water for 10 minutes?? Yes No

I have read the above Waiver of Liability and agree to its provisions.

Signature _____ Date: _____