



Volunteer Information and Release Form

Date: _____

Name: _____ Preferred name: _____
Last First Middle

Address: _____
Street/Box City State Zip

Phone: _____ E-mail: _____

Would you like to receive future Wilderness Wind newsletters and updates by email or postal mail? Email Postal

Preferred dates to serve at Wilderness Wind: _____

Work skills/interests: _____

Do you have any health concerns we should be aware of? *This information will remain confidential.*

Do you have any food allergies or dietary preferences? No Yes

Explain: _____

Have you ever been convicted of or pled guilty to a felony (including but not limited to drug-related charges, child abuse, other crimes of violence, theft, or motor vehicle violations)? No Yes

If yes, the director will contact you to explore the best way you can serve Wilderness Wind. *This information will remain confidential.*

Emergency contact information:

Name: _____

Relationship: _____

Phone: _____

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Release Form

Wilderness Wind makes every attempt to provide an enjoyable, memorable, and safe experience for all volunteers and staff involved in its program.

I want to participate in the volunteer activities of Wilderness Wind (WW). As a WW Volunteer, I freely, voluntarily and without duress, execute this Release under the following terms:

1. Volunteer Status. In participating in Wilderness Wind's programming, program development and building projects, I understand and agree that I am not an employee of Wilderness Wind and am not entitled to any wages and/or benefits associated with my services.

2. Assumption of risk. I acknowledge and understand that my work for WW may include activities that are hazardous and/or physically strenuous, including but not limited to construction, loading and unloading, and transportation to and from work locations. I understand that I may be exposed to personal injury or damage to my property as a result of my activities, the activities of other persons, or the conditions under which my services are performed while volunteering. I agree to the following:

- I will follow all instructions and policies provided by WW and its staff.
- I will only use equipment that I know how to operate and use safely.
- I will not undertake any activity for which I do not feel sufficiently prepared or able, and until I have received instructions.
- I will take all reasonable precautions to avoid injury to myself and to others, and damage to property.
- I will report to WW staff any knowledge or suspicion of illegal, dishonest or unethical activities that I encounter during my volunteer activities.
- I will not attempt to provide medical attention or services to any injured or ill person during my volunteer activities unless I am a licensed medical professional.

3. Insurance. I understand that Wilderness Wind does not have responsibility for providing any health, medical or disability insurance coverage. IT IS MY RESPONSIBILITY AS A VOLUNTEER TO ENSURE I HAVE MEDICAL/HEALTH INSURANCE.

4. Waiver and Release. I hereby release and forever discharge and agree to indemnify and hold harmless WW and all persons or entities associated with WW from any and all claims, liabilities, losses, damages, costs and expenses resulting from injury, illness or death of any person or persons, as well as property damage, that may arise out of my work as Volunteer, whether caused by the negligence of WW or its employees, agents or otherwise. I make this release on my own behalf and additionally on behalf of any and all of my heirs, assigns or other agents, both present and future.

5. Medical Treatment. I hereby release and forever hold harmless Wilderness Wind from any liability or claim whatsoever that arises or may arise due to any first aid, medical treatment or service rendered to me in connection to my activities with Wilderness Wind.

6. Photographic Release. I grant to WW the right to use photographic images and video or audio recordings of me that are made by WW or others during my volunteer work for WW.

7. Other. I agree that this Release is intended to be as broad and inclusive as permitted by the laws of Minnesota and that this Release is governed by and will be interpreted according to the laws of Minnesota. I understand that should any part of this Release be ruled invalid by a court, the other parts will remain valid and continue to be in effect.

Signature: _____ Date: _____

In the event that the above Volunteer is less than 18 years of age, this Release must be signed by a Parent or Legal Guardian.

**Please complete and return this form to director@wildernesswind.org or
Wilderness Wind
2945 Hwy 169, Ely, MN 55731**

. If you have any questions, please contact Wilderness Wind.

We look forward to working with you this summer!