



Volunteer Information Form

Name: _____

Address: _____

Email: _____

Phone Number: _____

Best Time to Contact You? _____

I am a: ☐ Adult (18 years and older) ☐ Youth (under 18 years)

Emergency Contact Information

Name: _____ Phone: _____

Relationship: _____

Event Months

Please circle which event(s) you are interested in volunteering for.

January

- 3on3 Hockey Tournament

February

- Family Day Winter Party

March

- Spring Spectacular

April

- Pickleball Tournament

May

- Spring Market

June

- Giant Garage Sale

July

- Stampede Breakfast

August

- Mid Summer Party

September

- Outdoor Movie Night

October

- Halloween Spooktacular

November

- Holiday Light Up

December

- Holiday Market
- Children's Holiday Hoopla

Photographic Release

I hereby give my consent for Tuscany residents association to use my child's, photograph and likeness in its publications, including its website. I release them from any expectation of confidentiality for the undersigned minor child and attest that I am the parent or legal guardian of the child listed below.

Name: _____ Age: _____

Signature: _____ Date: _____

Consent and Release

In consideration of the Youth Volunteer being permitted to participate in the volunteer activity or program, the parent/legal guardian/other person authorized to provide consent in respect of the Youth Volunteer hereby:

- Understand that my child/ward is a volunteer and not an employee of Tuscany Residents Association. I acknowledge and agree that the nature of the volunteer services typically performed by Tuscany Residents Association volunteers, and which may be performed by my child/ward as a Tuscany Residents Association volunteer may involve potential risk of injury. I willingly and freely assume any and all risk in connection with my child/ward's efforts or participation, including without limitation, risk of any accident or injury to person or property which he/she may sustain in connection with his/her participation as a volunteer or in any related project or activity.
- Any information collected, used and stored will be strictly confidential and will only be used in the matters related to the volunteer duties
- As a volunteer to Tuscany Residents Association, you will receive a safety orientation and you agree to abide by the safety rules of Tuscany Residents Association

I have read, understand and agree to the above statements:

Parent/Guardian Signature

Date

Youth Volunteer Signature

Date