



Epworth Furniture Ministry Volunteer Information

Name _____ Male Female

Address _____
Street City State Zip

Home Phone _____ Cell Phone _____

Email _____

Available to work (check all that apply):

Days Evenings Weekdays Weekends

Areas of interest (check all that apply):

- Transportation (pick up of household goods)
- Willing to drive a truck (16' HiCube)
- Organize household goods at Epworth Furniture Mart
- Help clients select household goods at Epworth Furniture Mart
- Help clients load furniture in vehicles at Epworth Furniture Mart
- Make phone calls / Office / Computer work

DISCLAIMER OF LIABILITY

I UNDERSTAND THAT THERE ARE INHERENT DANGERS AND RISKS ASSOCIATED WITH MY PARTICIPATION IN THIS ACTIVITY, IN USING THE FACILITIES AND IN TRAVELING TO AND FROM THE ACTIVITY. I ASSUME THOSE RISKS AND TAKE FULL RESPONSIBILITY FOR ANY INJURIES OR DAMAGES WHICH MAY BE INCURRED DURING THE ACTIVITY, IN USING THE FACILITY AND IN TRAVELING TO AND FROM THE ACTIVITY. I ACCORDINGLY HEREBY FULLY AND FOREVER EXONERATE AND DISCHARGE THE EPWORTH UNITED METHODIST CHURCH, IT'S STAFF, EMPLOYEES, VOLUNTEERS AND AGENTS FROM ANY AND ALL CLAIMS, DEMANDS, DAMAGES, RIGHTS OF ACTION OR CAUSES OF ACTION, PRESENT OR FUTURE, WHETHER THE SAME BE KNOWN, ANTICIPATED OR UNANTICIPATED, RESULTING FROM OR ARISING OUT OF MY PARTICIPATION IN THIS ACTIVITY, USING THE FACILITIES AND TRAVELING TO AND FROM THE ACTIVITY. THIS RELEASE BINDS THE UNDERSIGNED AND HIS OR HER SPOUSE, HEIRS, REPRESENTATIVES AND ASSIGNS.

Signature _____

Date _____