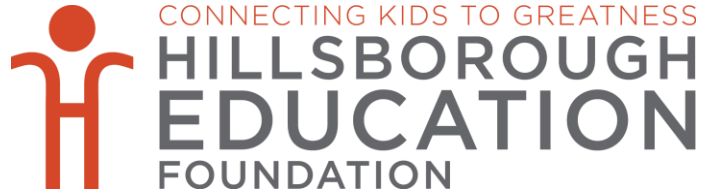


Volunteer Application

2306 N. Howard Ave.
Tampa, FL 33607
Phone: 813-574-0287
Fax: 813-574-0299

www.educationfoundation.com
dbecker@educationfoundation.com
kdonohue@educationdoundation.com
josterman@educationfoundation.com



Date: _____

Name: _____ Mr. Mrs. Ms. Miss

Mailing Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Work Phone/Cell Phone: _____

Birthdate: Month _____ Day _____ Year _____ E-Mail Address: _____

Emergency Contact Name: _____ Phone: _____ Relationship: _____

Current Employer: _____ Position: _____

Retired: Yes/ No (please circle one) Former employer/occupation: _____

Please list any special skills, hobbies or interests: _____

List days and times available:

Monday _____ Thursday _____

Tuesday _____ Friday _____

Wednesday _____ Saturday _____

Please circle what volunteer opportunities interest you?

Teaching Tools Free Supply Store: Die-Cutting Stocking Shopping (Mon., Wed/Thurs pm)

HEF: Mailings Special Events Front Desk Greeter/Receptionist Data Entry Marketing/PR

How did you hear about *the Hillsborough Education Foundation*? _____

Sign me up for your Hillsborough Education Foundation Core E-Newsletter

Hillsborough Education Foundation Staff Only:

Group: _____

Individual

Teacher/Volunteer: School _____

High School: _____

Release, Waiver of Liability and Indemnity Agreement

The undersigned ("Volunteer"), for himself/herself, his/her personal representatives, heirs and next of kin, in consideration for being permitted to work as a volunteer for Teaching Tools for Hillsborough Schools (TTHS), a program of the Hillsborough Education Foundation, whether at the Free Store, the warehouse, pick up agent or otherwise, including any areas where any activity related to events for TTHS occur, and other good and valuable consideration, the receipt of which is hereby acknowledged, voluntarily and knowingly executes this Release, Waiver of Liability and Indemnity Agreement ("Agreement"), with the express intention of giving a release and indemnification in favor of TTHS (including officers, directors, members, agents, servants, employees and assigns") and giving other covenants and warranties as follows:

1. Volunteer, with the intention of binding himself or herself, legal representatives, and assigns expressly releases and discharges TTHS from all claims or demands of injury, loss or damage, whatsoever, which volunteer or anyone claiming through or under Volunteer, may have arising from Volunteer's association with TTHS and the teachers who utilize the services and/or facilities of TTHS, regardless of whether the injury, loss or damage results from TTHS's negligence or fault. Volunteer expressly assumes any and all risks which may arise during the volunteer work, which may include but is not limited to interacting with the teachers, sorting donations, stocking shelves, and picking up donations, knowing that Volunteer may refuse to perform any activity or task requested. Volunteer further agrees that Volunteer is barred from bringing any claim or demand against TTHS for any such injury, loss or damage.

2. By signing this Release, Waiver of Liability and Indemnity Agreement, Volunteer intends to also release the officers and directors of TTHS, as set forth above, regardless of whether any injury, loss or damage results from the negligence or fault of the TTHS officers and directors.

3. VOLUNTEER FURTHER EXPRESSLY AGREES AND ACKNOWLEDGES THAT VOLUNTEER HAS CAREFULLY READ THIS AGREEMENT, KNOWS OF ITS CONTENTS, UNDERSTANDS IT, AND VOLUNTARILY SIGNS IT, and further agrees that no oral representations, statements or inducements apart from the foregoing written agreement have been made.

SIGNED this _____ day of _____, 201____, in Hillsborough County, Florida.

Volunteer Signature:_____

Print Name:_____

Witness Signature:_____

Witness Name:_____

Parent's Signature:_____

(if volunteer is under 18)



Information Release Form

I, _____, hereby authorize the Hillsborough Education Foundation to take photographs, videos, and testimonials (verbal and written) of myself. These photographs, videos, and testimonials can be used in any print media, television, and website marketing now and in the future.

Please Circle: YES or NO

I hereby release, discharge, and agree to hold harmless the Hillsborough Education Foundation and any representative or employee from any liability by virtue of any use whatsoever of said information.

Volunteer: _____ Date: _____

Volunteer's Signature _____

If the volunteer is under the age of 18:

Parent or Legal Guardian's Signature _____

Address: _____

Phone: _____ Cell Phone: _____

Email: _____