

## **Declaration of Volunteer Participation and Release of Liability**

I am not an employee of Seven Counties Services. I have volunteered to participate in a volunteer group project. By this declaration, I acknowledge that my participation in the activity is entirely voluntary. I understand that my participation in the activity is not intended to nor does it create any special legal relationship between Seven Counties Services and me and that neither Seven Counties Services nor any of its employees has required me to participate in this activity.

I acknowledge that Seven Counties Services does not have any liability for payment of workers' compensation benefits to me for any injury, damage or death that results from my negligent behavior, which may arise out of my participation in the activity. With knowledge that there may be risks involved, I voluntarily consent to participate in the activity and agree to assume any and all risks of injury, damage or death from my participation.

I have clearly read this declaration of voluntary participation and release of liability and fully understand its contents. I am aware that by signing this release of liability, I will be giving up any ability to make a claim or sue Seven Counties Services, its board of directors, agents, employees or representatives for any injury, damage or death resulting from my own negligence. With this in mind and without any mental reservation, I sign this release of liability voluntarily.

## **Confidentiality Policy**

All volunteers shall safeguard and treat as confidential all information (whether acquired through verbal communication, written record, or observation) pertaining to any client, relative or friend of any client, staff member, or volunteer of Seven Counties Services, which I may, through my affiliation with Seven Counties Services so acquire. I also affirm that I will not take any pictures of clients or any confidential information while serving with Seven Counties Services.

By signing your name below, you are affirming that all of the provided information above is correct to the best of your knowledge. You also affirm your acknowledgement of reading, understanding and consent to Seven Counties Services confidentiality policy.

## **Promotional Release**

I hereby voluntarily consent to have photographs, video, or audio of me taken by a person or persons from Seven Counties Services. I authorize the release and distribution of my photograph, video, or audio to any approved source and for any promotional use and purposes by Seven Counties Services. Promotional use may include, but is not limited to, use in any and all print and digital materials, use of your image and /or voice from recorded video and audio, and your image from all photographs. For example, photographs may be used on websites, Facebook, LinkedIn and other social media and career sites, internal and external posters and banners, e-newsletters, business cards, promotional advertising, and other publications. Audio and video may be used in various digital media platforms and other technologies as may become available.

There are no restrictions on the use of any of this material for purposes consistent with operations, marketing, and mission of Seven Counties Services. If I wish Seven Counties Services to discontinue the use of my photograph, video, or audio, I will notify the External Affairs Office in writing.

I release Seven Counties Services, its personnel or agents, and any other persons from any liability connected with the taking or use of such photograph, video, audio, or other materials. This agreement fully represents all terms and considerations; no other statements or promises have been made to me. I understand I will receive no compensation, monetary or otherwise, for the use of my photograph, video, or audio.

SIGNATURE OF VOLUNTEER	DATE	