

Celebration of Nations Volunteer Agreement and Acknowledgement, Waiver and Release from Liability

As a **Celebration of Nations event volunteer**, I agree to abide by the following code of conduct.

In accordance with this agreement, I will:

- Notify the Volunteer Coordinator *at least 48 hours* in advance for cancellation/change.
- Check in *at least 30 minutes* prior to my volunteer shift(s) at the Celebration of Nations Volunteer Check-in Table.
- Report to my volunteer supervisor *at least 15 minutes* prior to my volunteer shift.
- Dress appropriately in accordance with the expected weather for the day of the event and Celebration of Nations Volunteer Dress Code.
- Treat everyone with respect, patience and dignity.
- Notify my volunteer supervisor and ensure that my post is covered for the duration that I will be gone, should I need to leave my volunteer post.
- Stay hydrated and take breaks as necessary to maintain my ability to provide the best event experience possible for all involved with the Celebration of Nations.
- Refrain from any inappropriate behavior that could endanger the health and safety of the attendees or violate the rights of others. This includes but is not limited to: horseplay; offensive language; use, possession or being under the influence of alcohol or drugs; consumption of tobacco products; and the possession or use of weapons.
- Avoid situations where I am alone with children/youth, and not engage in any inappropriate interactions with any guest or volunteer at the event.
- Promptly report any emergencies or any actions that endanger others to my volunteer supervisor. In the case of an emergency situation, I will notify the volunteer supervisor after first taking immediate action necessary to ensure the health and safety of the guest or volunteer. For major injuries, call 911. For minor injuries, send guest/volunteer to the information booth where the first-aid station is located.

Celebration of Nations Volunteer Dress Code

- Volunteers are prohibited from wearing revealing clothing including halter and tank tops, midriff baring tops, low-cut shirts, miniskirts, short shorts, etc.
- Acceptable clothing includes short-sleeved shirts (covering the stomach, upper arms and chest); shorts that extend to, at a minimum, the tip of your index finger; long pants; and long-sleeved shirts.
- Volunteers should wear comfortable closed-toed shoes; athletic shoes/sneakers are highly recommended. Flip flops, sandals, high heels and dress shoes are prohibited.
- Volunteers may bring a simple hat to function as a shade covering. Ideal options include a baseball hat, a sun visor or a small brimmed sun hat.

Acknowledgement of Agreement

By signing below, I am certifying that I have read the Celebration of Nations volunteer code of conduct and understand that I am responsible for meeting these standards. I understand that should I fail to abide by these standards as represented above, my role as a volunteer with the Celebration of Nations event may be evaluated and/or withdrawn.

Printed Name

Signature

Date

Participant Acknowledgement of Risk and Release of Liability

Celebration of Nations Volunteer
Activity/Program

International Affairs
Department

Date

In consideration of the services of the **Curators of the University of Missouri**, on behalf of Missouri University of Science and Technology, its agents, officers, employees and all other persons or entities acting in any capacity on its behalf (hereinafter referred to as Missouri S&T). I hereby agree to release and discharge Missouri S&T, on behalf of myself, my heirs, assigns, personal representative and estate as follows:

1. I understand and acknowledge that the activity (program) I am about to voluntarily engage in bears certain known and unanticipated risks that could result in injury, death, illness, disease, emotional or physical distress, damage to myself, property or to third parties.
2. I expressly agree and promise to accept and assume all of the risks existing in this activity (program). My participation in this activity is purely voluntary. No one is forcing me to participate, and I elect to participate in spite of the risks.
3. I waive my right to make a claim or file a lawsuit against Missouri S&T if anyone is hurt or any property is damaged during my participation in and travel to and from this activity (program).
4. I certify that I have health, accident and liability insurance to cover any bodily injury or property damage I may cause or suffer while participating in this activity (program), or else I agree to bear the costs of such injury or damage to myself.

I hereby voluntarily release, forever discharge, and agree to hold harmless and indemnify Missouri S&T from any and all liability, claims, demands, actions or rights of action that are related to, arise out of, or are in any way connected with my participation in this activity (program).

My signature below indicates that I have had sufficient opportunity to read this entire document, that I have read it, and that I understand how it affects my legal rights. I agree to be bound by its terms.

Signature of Participant: _____ Date: _____

Print Name: _____ T-shirt Size: _____

If participant is less than 18 years of age:

I hereby declare that I am the parent or legal guardian of the named participant and I consent to the participant's participation in this program. In the event of sudden illness, accident or injury that may occur while my child or ward is engaged in this activity (program), when neither the parents nor guardians can be contacted, I hereby give my consent for emergency medical treatment as necessary under the circumstances to any medical care provider licensed under the laws of the State of Missouri.

Signature of Parent: _____ Date: _____

Print Name: _____ Phone: _____

Please return both signed forms to: **Linda Fulps
Missouri S&T Communications
105 Campus Support Facility
1201 State St.
Rolla, MO 65409-0220**

There will be a mandatory volunteer meeting the week before the event. For more information, call 573-341-7541.