



**HMONG CULTURAL  
NEW YEAR CELEBRATION**  
INCORPORATED

**VOLUNTEER AGREEMENT**

**Please Print:**

Full Name: \_\_\_\_\_

Tel. No. \_\_\_\_\_

Street Address:

\_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Zip Code: \_\_\_\_\_

Email: \_\_\_\_\_

**Emergency Contacts:**

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Tel.: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Tel.: \_\_\_\_\_

**Please indicate up to three Departments, Committees, and/or Positions that you would like to volunteer for:**

Positions: 1) \_\_\_\_\_ 2) \_\_\_\_\_ 3) \_\_\_\_\_

**Read below before signing.**

I, \_\_\_\_\_, am applying to perform work for Hmong Cultural New Year Celebration, Inc. (HCNYC) as a volunteer. I fully understand and agree:

1. That I will not receive any salary, wage, payment, remuneration, or employee benefits from HCNYC,
2. That I shall maintain the confidentiality of information accessed during the course of my volunteer work,
3. That I shall conduct myself in a reasonable and careful manner, not to exceed the authorized scope of my duties and responsibilities,
4. That this volunteer work for HCNYC may involve personal risk of damage or injury,
5. That I do assume all such risk, whether known or unknown to me, including travel to and from the volunteer work or participation in any events incidental to the volunteer work,
6. That I do release, hold harmless, and waive my right to sue HCNYC, its officers, workers, volunteers, and agents from any and all liability for damages of whatever kind to me that may result from my performance of the volunteer work, travel to and from the volunteer work, or participation in any events incidental to the volunteer work, and
7. That HCNYC has my permission or the right to utilize any photographs or videos taken for publicity purposes and to disseminate statements referring to me in conjunction with the event, authorizing any newspaper, company, or other organization to publish, republish, or exhibit said materials with or without identification of me by name.

By signing this form, I represent that I have read, understood, and agreed to the above terms, assumption of risk, release of liability, and waiver of right to sue.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**For those volunteers under 18 years of age, a parent or legal guardian must also read and sign the form below:**

**I approve of my son/daughter (Volunteer's name) \_\_\_\_\_**  
working as a volunteer for Hmong Cultural New Year Celebration, Inc. (HCNYC). As Parent or Guardian, I release HCNYC, its employees, volunteers, and agents from any and all liability, damages, or claims whatsoever for any injury or harm that may occur to my child Volunteer while working for HCNYC. I agree that I will make no claim or demand against HCNYC, its employees, volunteers, and agents if an injury or accident occurs during or traveling to and from a HCNYC project/event and understand that HCNYC is not responsible for transportation. I will look to my own resources, insurance, or assets to pay all medical bills, damages, or losses whatsoever if an injury occurs. **I also give permission to release my child to the emergency contacts listed above.**

Parent/Guardian Name: \_\_\_\_\_

Relationship to Minor: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

Phone #: \_\_\_\_\_

**THIS FORM WILL BE KEPT ON FILE. IT IS YOUR RESPONSIBILITY TO INFORM  
HCNYC OF ANY CHANGES OR IF PERMISSION IS RESCINDED.**