

Saturday, September 25, 2021 ~ 8:30am to Noon

**EMPLOYEE PARTICIPANT WAIVER**

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

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

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

Physical Limitations: \_\_\_\_\_

**Preferred Community Projects:**

- Senior Center       CASA       Food Bank  
 Domestic Violence       Touch-A-Truck       Drop off Drives

Mark top 3 choices, with 1 being first choice.

**Liability Waiver:**

I hereby release the Greene County United Way and its member agencies from any liability for an accident or injury that may occur while volunteering as part of the Greene County United Way Day of Service on September 25, 2021.

In addition, I give permission for the Greene County United Way and its affiliates to take and use photographs, audio, video, or film of me for purposes of publicizing Greene County United Way Day of Service activities.

**YES! I am interested in volunteering in other Greene County United Way activities.**

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

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

*Please return the completed form to Greene County United Way by  
Wednesday, September 8, 2021.*