Conditions of Volunteer Participation
YMCA OF TUSCALOOSA

The YMCA of Tuscaloosa’s mission is: Building a community where individuals, especially the young, are encouraged to develop their full potential in spirit, mind, and body. As a volunteer, I will cooperate in the fulfillment of this mission.

• **Volunteer Terms**: I agree to abide by the YMCA’s policies, procedures, and Code of Conduct. I understand the YMCA does not provide any health benefits or accident insurance for me as a volunteer (i.e. medical, dental, workers compensation, etc.); I understand it is my responsibility to provide this coverage. I understand the YMCA does not provide compensation of any kind to volunteers or trade volunteer services for membership or program fees. I understand that I am not obligated to volunteer and that I can discontinue my volunteer duties at any time. I understand that volunteerism is not employment, and that volunteers receive no preferential treatment if seeking YMCA employment.

• **Property Loss**: I understand the YMCA is not responsible for my personal property lost, damaged, or stolen while participating in YMCA volunteer activities.

• **Medical Treatment**: I give permission for the YMCA representatives to provide or arrange for emergency care for me, and to arrange for transport to an emergency center for treatment. I consent to medical treatment deemed immediately necessary or advisable by a physician if I am unable to act on my own. I further understand that the YMCA is not responsible for payment for such medical treatment.

• **Photograph Permission**: I give permission for the YMCA (local, national and international) to use, without limitation or obligation, photographs or other media that may include my words or voice to promote or interpret YMCA programs.

• **Commitment to Abuse Prevention**: If I become aware of any incident of suspected child abuse or inappropriate behavior with a minor or vulnerable adult by staff or other adults, I will report the incident to YMCA leadership immediately for investigation and so that reporting to the appropriate authorities can be made as required.

• **Release from Liability**: I understand that accidents may occur during my volunteer activities. By signing below, I release the YMCA of Tuscaloosa, its agents, directors, consultants, and employees from all liability based on any damage, loss, or injury, whether it is the result of ordinary negligence or otherwise caused to me or my dependent from participation as a volunteer.

I have read, understand and agree to the above statements.

Volunteer Printed Name__________________________ Volunteer Signature____________________________

Date____________________________________________