



**MEMBER/VOLUNTEER APPLICATION AND AGREEMENT**

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

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **ZIP Code:** \_\_\_\_\_

**Home Phone:** \_\_\_\_\_ **Cell Phone:** \_\_\_\_\_

**E-mail address:** \_\_\_\_\_ **Date of Birth:** \_\_\_\_\_

**Emergency Contact:** \_\_\_\_\_ **Emergency Contact Phone:** \_\_\_\_\_

**I would like information about:**

- Committee work/outreach/fund-raising.
- Call Buddies.
- Providing rides through LIFE Rides.
- \_\_\_\_\_ (other)

As a member/volunteer I will respect the privacy and confidentiality of other member/volunteers, not offer or accept professional advice, gifts, loans or further services to or from other member/volunteers in exchange for volunteer assistance, and refrain from imposing my own views on other member/volunteers.

My information will be entered into the Member Directory, pictures taken of me at events may be used on the website and in promotional materials, and I will receive periodic email updates.

I agree to release and discharge Eden Area Village from all responsibility or liability for services rendered by any third-party providers, and hold Eden Area Village harmless from and against any cost, expenses, or damages (including without limitation, reasonable attorney's fees) arising in connection with any and all claims brought by or through myself, including but not limited to claims brought by my insurance carrier.

**Membership in Eden Area Village is currently free. Donations are greatly appreciated.**

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Please return this form to:

**Eden Area Village**  
P. O. Box 474  
Hayward, CA 94543

6-2019