

# Volunteer Kennesaw State University (VKSU)

Student Center 264 ▪ 1000 Chastain Road ▪ Kennesaw

Phone: 770-423-6700 ▪ Fax: 770-423-6667

## Student Volunteer Service Registration Form

**PLEASE PRINT**

Today's Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Last Name \_\_\_\_\_ First Name \_\_\_\_\_

Street \_\_\_\_\_ Apt # \_\_\_\_\_ Home Phone \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_\_ Cell Phone \_\_\_\_\_

KSU # \_\_\_\_\_ Email address: \_\_\_\_\_

(Important: Must fill in)

County in which you live:

- Cherokee County
- Cobb County
- DeKalb County
- Douglas County
- Fulton County
- Paulding County
- Other \_\_\_\_\_

How did you learn about VKSU?:

- Advisor
- Display (Flyers, Banners, etc.)
- Internet
- Presentation by VKSU Staff
- Professor/Instructor
- Other \_\_\_\_\_

### **OPTIONAL INFORMATION:**

Birth date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Gender: \_\_\_\_ Male \_\_\_\_ Female

Ethnic Origin: \_\_\_\_ American Indian \_\_\_\_ Asian \_\_\_\_ Black \_\_\_\_ Hispanic \_\_\_\_ Middle Eastern

\_\_\_\_ Multi-Racial \_\_\_\_ Pacific Islander \_\_\_\_ White Other: \_\_\_\_\_

### **Reason for Volunteering**

- Court Order
- Fee Waiver
- Personal Satisfaction
- HPS 1000
- KSU 1101
- Communication Class
- Criminal Justice Class
- Human Services Class
- Psychology Class
- Sociology Class
- Other \_\_\_\_\_

### **Please Indicate:**

- Freshman
- Sophomore
- Junior
- Senior
- Grad

Major: \_\_\_\_\_



(Please see other side.)

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**ALL PARTICIPANTS IN VOLUNTARY SERVICE ACTIVITIES AND PROGRAMS  
ARE REQUIRED TO READ AND SIGN THE  
RELEASE WAIVER OF LIABILITY AND COVENANT FORM BELOW:**

I acknowledge that I am solely responsible for any hospital or other costs arising out of any bodily injury or property damage sustained through my participation in such voluntary service activities.

I have read it and understand. I accept and assume all risks, hazards, and dangers involved in any such activities in which I may elect to participate, including the training and preparation for and travel to and from the site of such activities.

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

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

**RELEASE WAIVER OF LIABILITY AND COVENANT NOT TO SUE  
READ CAREFULLY BEFORE SIGNING**

The undersigned hereby acknowledges that participation in volunteer service activities involves inherent risks of physical injury, illness or loss of personal property and assumes all such risks. The undersigned hereby agrees that for the consideration of KENNESAW STATE UNIVERSITY allowing the undersigned to participate in volunteer service activities sponsored or recommended by Volunteer Kennesaw State University, the undersigned participant does hereby waive liability, release and forever discharge the Institution and the Board of Regents of the University System of Georgia, its members individually, and its officers, agents, and employees of and from any and all claims, demands, rights and causes of action of whatever kind or nature, arising out of all known and unknown, foreseen and unforeseen bodily and personal injuries, damage to property and the consequences thereof, including death, resulting from my voluntary participation in or in any way connected with such volunteer service programs and activities.

I further covenant and agree that for the consideration stated above I will not sue the Institution, the Board of Regents of the University System of Georgia, its members individually, its officers, agents, or employees for any claim for damages arising or growing out of my voluntary participation in volunteer service programs or activities.

I understand that the acceptance of this release, waiver of liability and covenant not to sue the Institution or the Board of Regents of the University System of Georgia or any agent or employees thereof, shall not constitute a waiver, in whole or in part, of sovereign or official immunity by said Boards, its members, officers, agents, and employees.

Further, I understand that this release, waiver of liability, and covenant not to sue shall be effective during the time period of the service activity while I am enrolled or employed at Kennesaw State University. I have received a copy of this document and I certify that I am \_\_\_\_\_ **years of age** and suffering under no legal disabilities, and I have read the above carefully before signing.

**Signature of Participant** \_\_\_\_\_

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

**Signed in the presence of** \_\_\_\_\_

