



MARTIN LUTHER KING, JR.

DAY OF SERVICE

January 16, 2012



Sponsored By:

 *Nature Coast
Volunteer Center*



REGISTER TO VOLUNTEER TODAY!

DATE: Monday January 16, 2012
TIME: 8:30 a.m. to 1:00 p.m.
PLACE: Citrus County Builders Association
1196 S. Lecanto Hwy.
Lecanto, FL 34461

Volunteer Name: _____ Check if under 18

Address: _____ City _____ State: _____ Zip _____

E-Mail: _____ Phone: _____

Emergency Contact _____ Phone _____ Shirt Size _____

VOLUNTEER'S RELEASE OF LIABILITY

In consideration of being permitted to participate in the Citrus County Builders Association Builders Care, Inc., a Florida corporation which is a "Charitable Arm" of the Citrus County Builders Association, Inc., a Florida Corporation. The Undersigned hereby releases and holds CITRUS COUNTY BUILDERS ASSOCIATION BUILDERS CARE, INC., CITRUS COUNTY BUILDERS ASSOCIATION, INC., Nature Coast Volunteer Center and all of the individuals who are now serving or hereafter serve, as directors and /or officers of either of these corporations, harmless from any liability for any claim or damages which may arise from any injury or death incurred by me or any other minors with me while providing services or labor in any charitable construction project or otherwise while participating in any way in any charitable project of the Citrus Builders Care, Inc.

I give to Citrus Builders Care, Inc., Nature Coast Volunteer Center, its agents, and assign unlimited permission to use, publish, and republish for purposes of advertising, public relations, trade, or any other lawful use, photographic or digital images and information about me and reproductions of my likeness (photographic or otherwise) and my voice, whether or not related to any affiliation with the Citrus Builders Care, Inc., with or without my name.

The undersigned participant hereby certifies that he/she is at least 18 years of age, has read and understands the foregoing and is signing the Release freely and voluntarily intending to be bound by it.

Date: _____

Signature of Participant

Printed Name of Participant

PARENTAL CONSENT/RELEASE- If the individual is a minor, (under 18 years of age), the following must be signed by a parent or legal guardian. I hereby consent and agree, individually, and as a parent or legal guardian of _____ to all the terms and provisions above.

Print Parent Name: _____ Parent signature: _____

PLEASE RETURN COMPLETED REGISTRATION TO:

MAIL:

Nature Coast Volunteer Center
2804 W. Marc Knighton Ct., Key # 4
Lecanto, FL 34461

FAX:

352-527-5951

E-MAIL:

ncvc@bcc.citrus.fl.us

Phone: (352) 527-5950