



Volunteer Group Interest Form

Please complete and return to SOS. Please note: completing the form does not guarantee a volunteer date. You must receive confirmation before your group is scheduled.

Today's Date: _____

Contact Name: _____
(First) (M) (Last)

Prefix: Mr Mrs Ms Dr Suffix: Jr RN Other

Address: _____

City, State: _____ Zip: _____

Phone: _____ (c) Phone: _____ (w)

Email: _____

By providing your contact information and email address, you'll receive periodic updates from Supplies Over Seas and can unsubscribe at any time.

More About You Volunteer Group:

Group/Organization Name: _____

Has your group volunteered with SOS in the past? No Yes

Additional information about your group: _____

Does your group have any medical experience? No Yes Type: _____

How did you hear about us? Friend Online Through an organization Other: _____

Is your group required to do volunteer service? No Yes Number of hours: _____

How many people will be volunteering with your group: _____

What is the age range of your group: _____

Do you have anyone in your group that is unable to stand for 3 hours? No Yes

Scheduling: SOS will find a volunteer leader to work with your group. Please keep in mind that to find a volunteer leader we will need up to 14 days' notice for your volunteer group.

Which session would your group like to volunteer for? (check all that apply)

- Weekday Morning (9am-noon)
- Weekday Afternoon (1pm-4pm)
- Saturday Sort (2nd/4th Saturdays of the month, 9am-noon)

Please list preferred dates for your volunteer group (example: Any Monday in October, April 15th or April 19th, etc.): _____

Return form to:

admin@suppliesoverseas.org
fax: 502.568.3979

Contact information/location:

Phone: 502.736.6360
1500 Arlington Avenue
Louisville, KY 40206

Thank you so much for your interest in volunteering with SOS! Please feel free to contact us with any questions. We'll get back to you as soon as possible about confirming a volunteer sort for your group.

LIABILITY RELEASE

Please provide this form to everyone in the group and bring with you on your volunteer date.

This form must be signed and dated by anyone intending to volunteer for Supplies Over Seas. Volunteers under 18 years of age must have a parent or guardian sign this form.

Release and Disclaimer (please read carefully):

In connection with my voluntary involvement in activities undertaken for, and with the participation and support of Supplies Over Seas, a non-profit charitable organization, I hereby agree, for myself, my heirs, assigns, executors, and administrators to release and discharge Supplies Over Seas, its officers and directors, employees, agents and volunteers from all claims, demands, and actions for injuries sustained to my person and/or property as a result of my involvement in such activities, whether or not resulting from my negligence, and I agree to release and hold Supplies Over Seas, its officers and directors, employees, agents and volunteers harmless from any cause or action, claim, or suit arising there from. I agree to grant Supplies Over Seas the right to use my name and image in all forms and media. I hereby attest that my attendance and involvement in such activities is voluntary, that I am participating at my own risk, and that I have read the foregoing terms and conditions of this release. Additionally, by signing below, I agree that **Supplies Over Seas is not responsible for any theft, damage or misplacement of property** incurred during activities undertaken for Supplies Over Seas.

I assume all liability and responsibility and release Supplies Over Seas from any and all claims and/or liability.

Signature of volunteer

Signature of parent/guardian for under 18 years of age volunteers

Date: _____

PHOTO RELEASE

In consideration of the acceptance of my volunteer application to participate as a volunteer for Supplies Over Seas, I authorize and give full permission to Supplies Over Seas for use of my name and photograph, still or video, in connection with my volunteer activities and I consent to the use of such material or its reproduction in any manner and by any medium which Supplies Over Seas deems appropriate. **NOTE: It is your responsibility to remove yourself from any photo if you choose not to sign below**

Signature of volunteer

Signature of parent/guardian for under 18 years of age volunteers

Date: _____