



TOWN OF MIAMI LAKES
VOLUNTEER REGISTRATION FORM

1) VOLUNTEER INFORMATION (Please print or type)

Full Name Last First Birthdate Gender
Address Number & Street City State Zip
Telephone Home Cellular Email

2) PARTICIPANT'S LEGAL GUARDIAN INFORMATION

Full Name Last First
Telephone Home Cellular Email
Full Name Last First
Telephone Home Cellular Email

3) EVENT/ACTIVITY WISHING TO VOLUNTEER FOR

NAME DATE

*PLEASE NOTE WE REQUIRE ONE FORM PER EVENT/ACTIVITY
To view a list of volunteer opportunities, please visit www.miamilakes-fl.gov/volunteer

WAIVER AND CONSENT

For myself, as a participant, or as the parent or guardian of a minor child participating in activities or using any facilities of the Community and Leisure Services Department, I hereby waive any claim against the Town of Miami Lakes and it's agents, servants and employees hereafter arising from injuries sustained while participating in or using said facilities to myself or said child. I do covenant to indemnify, hold harmless and defend the said Town, its agents, servants and employees from any claim, damages on demand hereafter arising out of any injury to said child or to myself regardless of whether such injury to said child or to myself is caused in whole or in part by the negligence of said Town or by the negligence of the agents, servants and employees of the Town.

My image or my child's image may appear in event/program related materials or advertisements and I agree that the Town of Miami Lakes may use my likeness or my child's likeness without compensation. I have read, understand, and agree to all the terms of this document.

PARTICIPANT/ PARENT OR GUARDIAN OF PARTICIPANT SIGNATURE & DATE