The Charlotte Area Foundation for Music and Art, Inc. 501(c)(3)

contact@charlotteareafoundation.org (704) 614-3008

Volunteer Application, Release Form

Volunteer first and last name	
Address	
Phone Number	Email
hereby offer my services as a volunteer with the events for which I attend. I we that are supervised, I will not hold the these events. I give permission for my	Foundation for Music and Art, Inc. 501(c)(3), I report to participate in the various activities associated understand that while there will be such events a Foundation liable for personal injury during yealf to be treated medically in case of an incerted effort will be made to notify persons listed
Name of contact if injured	
Phone Number	Relationship
representatives to take photographs of	ation for Music and Art, Inc. 501(c)(3) and its f me and my property in connection with events Foundation to copyright, use and publish the
such photographs of me with or witho	lation for Music and Art, Inc. 501(c)(3) may use out my name and for any lawful purpose, including y, illustration, advertising, and web content.
Signature of Volunteer	Date
Signature of Guardian (if under 18)	Date

Please contact Deborah at <u>Deborah@charlotteareafoundation.org</u> with any questions.