



Volunteer Registration Form

General Information

First Name:		Middle Name:		Surname/ Family Name:	
Gender:	Male <input type="checkbox"/>	Female <input type="checkbox"/>	Date of Birth: dd/mm/yyyy		
Current Address (number, street, town/city, state/country, zip/post code)					
Phone: (Home)		Phone: (Work)		Mobile Phone:	
Nationality:		Occupation:		Email Address:	
Passport #:		Country Issued:		Date Issued:	
English Language Skills: Native Speaker <input type="checkbox"/> Good <input type="checkbox"/> Poor <input type="checkbox"/> None <input type="checkbox"/>					
List construction skill, if you have any:					
List church affiliations or any other you might have:					

Emergency Contact Information

Contact Name:		Relationship:	
Current Address (number, street, town/city, state/country, zip code)			
Phone: (Day)		Phone (Night)	
Email:			
The following information may be needed by any hospital or medical practitioner not having access to your medical history.			
Blood Type:		Date of last Tetanus Shot: dd/mm/yyyy	
Allergies to medicine, food, dust, etc. (please provide any dietary concerns):			
Current Medication being taken:			
Physical Impairments:			
Personal Physicians Name:			
Current Address (number, street, town/city, state/country, zip code)			
Phone: (Day)		Phone (Night)	
Email:			
If you have PERSONAL/COMPANY HEALTH INSURANCE COVERAGE, please provide the following information.			
Insurance Company:		Policy Number:	
Insurance Agent:		Agent's Phone:	

I understand that I must purchase and provide information of international travel/medical insurance for the entire term of my volunteer service. I certify that the answer I have given are true and correct to the best of my knowledge.

Signature of Volunteer: _____ Date: _____

RELEASE AND WAIVER OF LIABILITY (Adult)

PLEASE READ CAREFULLY! THIS IS A LEGAL DOCUMENT!

Important: Each participant, including team leaders, must have a signed "Release and Waiver of Liability" on file with "Ghanahilfe – Kinder von Atibie e.V." prior to departure. Please PRINT all information in blanks provided.

This Release and Waiver of Liability (the "Release") executed on this _____ Day of _____ (month), 200____, by _____ (the "Volunteer") in favour of "GHANAHILFE – KINDER VON ATIBIE E.V." a Accra, Ghana non-profit entity formed under the laws of GHANA (host country), their trustees, directors, officers, employees, and agents (collectively, "Ghanahilfe – Kinder von Atibie e.V.").

The Volunteer desires to work as a volunteer for "Ghanahilfe – Kinder von Atibie e.V." and engage in the activities related to being a volunteer. The Volunteer understands that the activities may include constructing and rehabilitating residential buildings and living in housing provided for volunteers of "Ghanahilfe – Kinder von Atibie e.V.". The Volunteer does hereby freely, voluntarily, and without duress execute this Release under the following terms:

- 1. Waiver and Release.** Volunteer does hereby release and forever discharge and hold harmless "Ghanahilfe – Kinder von Atibie e.V." and its successors and assigns from any and all liability, claims, and demands of whatever kind or nature, either in law or in equity, which arise or may hereafter arise from Volunteer's work for "Ghanahilfe – Kinder von Atibie e.V.". Volunteer understands and acknowledges that this Release discharges "Ghanahilfe – Kinder von Atibie e.V." from any liability or claim that the Volunteer may have against "Ghanahilfe – Kinder von Atibie e.V." with respect to any bodily injury, personal injury, illness, death, or property damage that may result from Volunteer's work for "Ghanahilfe – Kinder von Atibie e.V.". Volunteer also understands that, except as otherwise agreed to by "Ghanahilfe – Kinder von Atibie e.V." in writing, "Ghanahilfe – Kinder von Atibie e.V." does not assume any responsibility for or obligation to provide financial assistance or other assistance, including but not limited to medical, health, or disability insurance, in the event of injury or illness.
- 2. Medical Treatment.** Except as otherwise agreed to by "Ghanahilfe – Kinder von Atibie e.V." in writing, Volunteer does hereby release and forever discharge "Ghanahilfe – Kinder von Atibie e.V." from any claim whatsoever which arises or may hereafter arise on account of any first aid, treatment, or service rendered in connection with the Volunteer's work for "Ghanahilfe – Kinder von Atibie e.V.".
- 3. Assumption of the Risk.** The Volunteer understands that the work for "Ghanahilfe – Kinder von Atibie e.V." may include activities that may be hazardous to the Volunteer, including, but not limited to, construction, loading and unloading, and transportation to and from the work sites. In connection thereto, Volunteer recognizes and understands that activities at "Ghanahilfe – Kinder von Atibie e.V." may, in some situations, involve inherently dangerous activities. Volunteer hereby expressly and specifically assumes the risk of injury or harm in these activities and releases "Ghanahilfe – Kinder von Atibie e.V." from all liability for injury, illness, death, or property damage resulting from the activities of the Volunteer's work for "Ghanahilfe – Kinder von Atibie e.V.".
- 4. Insurance.** The Volunteer understands that, except as otherwise agreed to by "Ghanahilfe – Kinder von Atibie e.V." in writing; "Ghanahilfe – Kinder von Atibie e.V." does not carry or maintain health, medical, or disability insurance coverage for any Volunteer.
- 5. Photographic Release.** Volunteer does hereby grant and convey unto "Ghanahilfe – Kinder von Atibie e.V." all right, title, and interest in any and all photographic images and video or audio recordings made by "Ghanahilfe – Kinder von Atibie e.V." during the Volunteer's work for "Ghanahilfe – Kinder von Atibie e.V.", including, but not limited to, any royalties, proceeds, or other benefits derived from such photographs or recordings.
- 6. Other.** Volunteer expressly agrees that this Release is intended to be as broad and inclusive as permitted by the laws of GHANA (hosting country); and that this Release shall be governed by and interpreted in accordance with the laws of GHANA. Volunteer agrees that in the event that any clause or provision of this Release shall be held to be invalid by any court of competent jurisdiction, the invalidity of such clause or provision shall not otherwise affect the remaining provisions of this Release which shall continue to be enforceable.

To express my understanding of this release, I sign here with a witness. I also verify that I am now over eighteen (18) years old. My date of birth is: Day _____ Month _____ Year _____

Volunteer Name (print):
Signature: _____
Date (month/day/year):
Phone: +

Witness Name (please print):
Signature: _____
Date (month/day/year):