

Volunteer Acknowledgement Agreement
Randolph College

Department Volunteering For: _____

Period for which I am volunteering: _____
Date(s)

Name: _____ Date: _____

Address: _____ Phone: _____

City, State, & Zip: _____ E-mail: _____

In case of emergency, please contact: Name: _____

Day Phone #: _____ Evening Phone #: _____

1. I acknowledge that I am a full time employee of Randolph College in the _____ office and am accepting additional responsibilities as a volunteer in the athletics department.
2. I do not expect and understand that I will not receive any additional compensation or benefits now or in the future by accepting these additional duties.
3. I agree to become familiar and comply with the College's conduct policies; including the National Collegiate Athletic Association (NCAA) rules and regulations, as well as Old Dominion Athletic Conference (ODAC) policies if volunteering in the Athletic Department.
4. I give the College permission to use any photograph, video, and/or recording of me made by the College during the course of my volunteer services, including but not limited to benefits gained from such photographs and recordings.
5. I understand that my primary responsibilities in the admissions office are paramount and must not be compromised to conduct my volunteer activities.
6. I understand and agree that I fully and voluntarily assume the risks of any injury, illness, damage, or loss that may result during the course of my volunteer service to the College.
7. I hereby release the College, its board of trustees, officers, employees, and agents from any and all claims, costs, liabilities, expenses and judgment whatsoever, including attorney's fees and court costs, resulting from my volunteer services to Randolph College.

Randolph College appreciates you volunteering your time/services to the department listed above. This agreement shall continue in effect during the period listed above, unless terminated or modified with the written approval of the College.

Volunteer Signature: _____ Date: _____

Admissions Supervisor Signature: _____ Date: _____