



Philharmonic Society Volunteer General Waiver

The Philharmonic Society of Orange County requires the agreement to the information listed on this form. For any questions, please contact us at volunteer@philharmonicsociety.org.

Volunteer Information

Name _____

Committee or School (if applicable) _____

Cell Number _____

Email Address _____

Emergency Contact Name _____

Emergency Contact Phone Number _____

Date of Birth _____

1. Promotion/Publicity Release

The Philharmonic Society of Orange County may use your name and/or image in any form of recorded media. If you do not wish your image, first and last name to be used, you must indicate it by checking the opt-out box.

Opt-Out

2. Liability Waiver

By participating in Philharmonic Society of Orange County volunteer activities and all related activities, including any activities incidental to such participation (“Volunteer Activities”), the undersigned Volunteer or Parent/Legal Guardian of Volunteer if Volunteer is under age 18 (hereafter referred to using “I”, “me”, or “my”) releases and agrees to hold the Philharmonic Society or its officers, directors, employees, sub-contractors, sponsors, agents and affiliates harmless from and against all present and future claims, damages, liabilities, and/or losses that may arise from my participation in the Volunteer Activities wherever, whenever, or however the same may occur.

I understand and agree that the Philharmonic Society of Orange County is not responsible for any injury or property damage arising out of the Volunteer Activities, even if caused by their ordinary negligence or otherwise.

I am voluntarily participating in the Volunteer Activities with knowledge of any danger involved and I agree to accept all risks of participation.

I also agree to indemnify and hold harmless the Philharmonic Society of Orange County for all claims arising out of my participation in the Volunteer Activities.

I understand that this document is intended to be as broad and inclusive as permitted by the laws of California and agree that if any portion of this Agreement is invalid, the remainder will continue in full legal force and effect.

I also acknowledge that the Philharmonic Society of Orange County has not arranged and does not carry any medical or death insurance of any kind for my benefit or that of Volunteer (if Volunteer is under 18), my parents, guardians, trustees, heirs, executors, administrators, successors, and assigns.

I represent that, to my knowledge, I am in good health and suffer no physical impairment that would or should prevent my participation in Volunteer Activities.

This waiver and release of liability shall remain in effect for the duration of my participation in the activity, during this initial and all subsequent events of participation.

Please return this form to the Manager of Volunteer and Education Services, Philharmonic Society 1124 Main Street, Suite B, Irvine, CA 92614 or email to volunteer@philharmonicsociety.org.

Print Name (Volunteer)

Signature (Volunteer) Date

Print Name of Parent/Guardian Signature, if under 18

Signature of Parent/Guardian Signature, if under 18