



Amobi Okoye Foundation
Volunteer Form

Please return the completed form via fax to: (281) 398-4211

Thank you for your consideration to serve as an Amobi Okoye Foundation volunteer.

Yes, Please include me as an Amobi Okoye Foundation volunteer.

First Name: _____

Last Name: _____

Sex: m f DOB: _____

Adult Shirt Size: s m l xl xxl xxxl

Email: _____

Cell phone: _____

Street Address: _____

City: _____

State: _____

Zip: _____

Area of Interest:

1) _____

2) _____

3) _____

4) _____

5) _____

6) _____

Waiver and Release:

I understand and agree that as a volunteer, I am a volunteer and there is no pay nor other commitment due me for volunteer services rendered. I, the undersigned agree and certify that I am of at least 18 years of age and/or have the authority to sign for and give consent for the person named above who is under the age of 18. I hereby assume full and complete responsibility for any injury or accident which may occur during my participation as a volunteer for the Amobi Okoye Foundation and/or InVictus91 Sports Marketing, Amobi Okoye Holdings or any partnering organization, including during special events, while being transported or while on the premises of Amobi Okoye Foundation and/or partnering organization's grounds, vehicles or otherwise. I (on behalf of my heirs, executors and administrators or assigns) hereby agree not to file suit against Amobi Okoye, Amobi Okoye Foundation, Inc., InVictus91 Sports and Entertainment Marketing, Amobi Okoye Holdings or other business interests, partners, employees, employer partners, agents, respective affiliates, and others ("The Released Parties") for, and hereby indemnify and hold harmless the Released Parties from and against any loss, liability, damage or claim I may have arising out of my participation in the Foundations activities, events, transportation, or actions of volunteers, attendees, honorees, sponsors, media, partners, agents, affiliates, or otherwise not mentioned here, whether the same is caused by or results from falls, contact with other attendees, honorees, conditions of the event facility, entry way, parking lot, physical plant facilities transportation, or otherwise, negligence of a Released Party or otherwise. I hereby grant full permission to the Released Parties to use photographs, videotapes, and other recordings of me from this event without further permissions or compensation. I agree to comply with the rules of this event and acknowledge that the event committee reserves the right to reject my volunteer participation form for any reason. My participation is invalid unless signed by the participant and/or if the volunteer is less than 18 years of age, by an authorized consenting adult parent or guardian. I agree that I will be schedule to participate at the sole discretion of the Amobi Okoye Foundation staff and/or designated team members.

Signature

Date

Providing Hope to Kids & Communities

1832 Snake River Rd. Suite C • Katy, TX 77449 • 866-998-4203 • info@amobiokoyefoundation.org •
AmobiOkoyeFoundation.org