



Volunteer Waiver & Consent Form

Description of Activity

Staff and/or Interns from Urban Roots will lead you in agricultural work on the Urban Roots farm in East Austin. You will be engaged in volunteer activities such as harvesting, weeding, and other farm work as needed. Urban Roots employees are committed to your safety and will take every reasonable precaution to keep you safe.

Please read the information below, initial each section, and provide your signature at the bottom of the page.

At Urban Roots, we are a true community farm and rely on volunteers across the community to provide a significant bulk of the work on our farm to grow 30,000 pounds of produce each year. We do not conduct background checks on any farm volunteers. We believe it is important to create a welcoming and inclusive environment on our farm. We are registered with the Austin Municipal Court as an agency that youth and adults can come to complete court-ordered community service hours for non violent and non-sexual offenses.

Release of Liability

I understand that Urban Roots employees take every reasonable precaution to keep me safe. However, due to the nature of farm work, unforeseen injuries may occur. I agree to hold harmless Urban Roots employees, farm interns, board members, and volunteers of any injuries that I may incur on or offsite in conjunction with volunteer activities. *I further waive and release any claims or causes of action I may have against Urban Roots, including its board members, employees, and farm interns arising from any injuries that I may incur on or offsite in conjunction with volunteer activities, including but not limited to claims or causes of action arising in whole or in part from the negligence of Urban Roots.*

Initials _____

Photograph Consent and Release

I give permission to Urban Roots to take photos for use on the Urban Roots web site and any promotional materials without being compensated. *I further consent to having my image or representation used for publication for news, promotion, website, social media, or any other purpose by Urban Roots and its affiliates and representatives. I release Urban Roots, its officers and employees, and all personas involved from any liability connected with the taking, digitizing, or publication of any photo, video, or recording. I waive all rights to any claims for royalties or payments in connection to use or publication of these materials, along with all rights to inspect or approve any photo, video, or recording.*

Initials _____

My signature below indicates that I have read, understand, and agree to the information above:

Name: _____

Signature: _____

Today's date: _____

For questions or a record of your time served, please email: volunteer@urbanrootsatx.org



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Safety Protocols for all Visitors & Volunteers: There is a current outbreak of Coronavirus (covid-19). If you feel ill, or have any of the following symptoms: cough, fever, shortness of breath, we ask that you stay home. We are grateful for your interest and would love it if you could return when you are feeling better.

Initial by each statement to confirm.

- ☐ I have not been diagnosed with COVID or cared for someone with COVID in the past 10 days.
- ☐ I have not been ill or experienced any one of the following symptoms in the last 10 days: cough, fever, shortness of breath or loss of taste or smell.
- ☐ I have not attended any large gatherings or traveled outside of our daily routine in the last 7 days.
- ☐ If I show any symptoms in the next 3 days I will contact Urban Roots at volunteer@urbanrootsatx.org.
- ☐ I will wear a mask while handling vegetables and to approach other volunteers.

Health & Food Safety:

Urban Roots is committed to the safety of its volunteers. Urban Roots has asked that I stay home if I have any signs of illness. There is a current outbreak of Coronavirus (covid-19) and I understand the health risks that are involved in attending a gathering of people. I understand that Urban Roots is following the CDC's and the City of Austin's strict guidelines and promise to help Urban Roots maintain it's high standards. Urban Roots has shared with me it's Safety Protocols and Community Agreements and I understand the health risks to self and others if safety protocols are not followed.

Initials _____

My signature below indicates that I have read, understand, and agree to the information above:

Name: _____

Signature: _____

Today's date: _____