



## **Confidentiality**

S.O.A.P. desires to keep certain program details confidential. THEREFORE, volunteers shall not divulge, furnish, make accessible or use in any way any designs, processes, or material directly or indirectly used during the outreach. \_\_\_\_\_ Initial

## **Liability Waiver Form**

To the best of my knowledge, I am in good physical condition and fully able to participate in the S.O.A.P. outreach. I am fully aware of the potential risks and hazards connected with aligning myself against human traffickers. I VOLUNTARILY ASSUME FULL RESPONSIBILITY FOR ANY RISKS OR LOSS, PROPERTY DAMAGE, OR PERSONAL INJURY, INCLUDING DEATH, that may be sustained by me, or loss or damage to property owned by me, as a result of participation with this organization. \_\_\_\_\_ Initial

## **Media**

I hereby grant permission to SOAP, the right to use the photographs taken of or provided by me as identified above for use in any SOAP publication. \_\_\_\_\_ Initial

## **Drivers**

I hereby vow that as a driver to the SOAP outreaches, that I have current and up to date auto insurance and a valid drivers license. I voluntarily assume full responsibility for any risks, damages or injury while driving during the outreach and agree not to hold SOAP responsible. \_\_\_\_\_ Initial

Volunteer Printed Name: \_\_\_\_\_

Volunteer Signature: \_\_\_\_\_ Date: \_\_\_\_\_