Thank you for volunteering with Sky Island Alliance (SIA)! Your volunteer contributions support our overall goal of restoring and protecting the wildlife and habitats of the Sky Island region. We could not achieve positive conservation results without your valuable time and effort – thank you!

**Volunteer Agreement**

By signing below, you agree:

1. To represent SIA with professionalism and courtesy, treat other volunteers, participants and visitors with respect, and keep personal opinions and actions separate from those made as a representative of SIA.
2. To allow SIA to use any photographs taken of or submitted by yourself while volunteering for SIA. Photographs taken of volunteers may appear in reports to SIA funders, the organization’s print and online media, and/or any other similar outreach and education materials.
3. To redirect any media inquiries regarding a volunteer outing and/or project to designated Sky Island Alliance staff.
4. Not to collect or otherwise remove any animal or plant specimens or cultural resources from any worksite while volunteering with SIA, unless collecting such specimens has been directly authorized by SIA staff as part of our conservation efforts. SIA expects all volunteers will follow the “Leave No Trace” ethic when participating in SIA-sponsored events.
5. Not to disclose, either publicly or privately, any photographs, species photographed, specific or general location of cameras, or any other information collected through remote cameras, field observations, or wildlife track monitoring (camera and transect locations) without prior written consent from SIA staff (program manager, coordinator or director). This is intended to protect rare, threatened and/or endangered species and other things which may include information considered by the organization and others to be highly sensitive and confidential.
6. To comply with all applicable local, state, federal and international laws and regulations where work for SIA is being conducted.

**Release and Indemnity**

The undersigned (legal guardian, if minor), in consideration of the opportunity to participate in a Sky Island Alliance work trip, acknowledge that during this trip I may encounter certain dangers—including, without limitation, falling rocks, rough and/or slippery terrain, insect and animal stings and bites, lightning and exposure to unpredictable elements.

I recognize and agree that I am taking part in this trip at my own risk. I acknowledge that Sky Island Alliance makes no warranty or representation, express or implied, regarding the conditions that may be encountered during the trip, the safety of pets or equipment on the trip, and/or any means of transportation to or from the trip, and that Sky Island Alliance will have no liability for any defect or dangerous condition pertaining thereto.

I recognize that participating in outdoor activities in natural areas can be inherently dangerous. I accept and assume the risk of injury to my person that may result from my participation in these activities. I recognize that I am responsible for my own safety and agree to take appropriate care in order to avoid injury.

In consideration of the opportunity to participate in this trip by the Sky Island Alliance, and acting for myself and my heirs, personal representatives, assigns and guardians, I hereby agree to and do:

1. Release Sky Island Alliance, its principals, agents, employees, officers, and directors from any expense, cost, claim, causes of action or other liabilities for any injury to me, for my death, and for participation in or travel to or from this trip, whether or not such injury, death, damage or destruction results from the negligence, including gross negligence or other fault of any person; and

2. Indemnify and hold harmless Sky Island Alliance, its principals, agents, employees, officers, and directors against any and all loss, damage, expenses, cost, claims, causes of action or liabilities (including attorney’s fees) for damage, injury, death or losses whether caused by negligence, or any other fault, arising out of, or in any way connected with, my participation in, or travel to or from the trip; and

3. Assume full responsibility and liability for any injury to or death of any person and for damage to or destruction of property caused by me during or while traveling to, from and on the trip.

**Please Write Legibly**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Volunteer Name

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Address

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City State Zip Code

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone # Email Address

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Emergency Contact and Phone #

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Volunteer Signature Date

(Signature of Parent or Guardian, if Minor)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Received by (SIA staff) Date

Please check this box if you do **not** want to be kept informed of the amazing volunteer opportunities and special events put on by Sky Island Alliance.