## Cornell Cooperative Extension of Columbia and Greene Counties Casual Volunteer Registration Form

			To Be Completed by Volu	inteer	
1.	Name				
		First	MI	Last	
2.	Mailing Add	dress:			
3.	Email Addr	ess:			
4.					
	Age Group:		<b>31-45</b>	<b>1</b> 46-65	<b>□</b> 66+
	Gender:	☐ Male	☐ Female		
7.	Ethnicity:	☐ Hispanic/La	atino 🗖 Not Hispanic/Latino		
8.	Race	☐ White ☐ Asian	☐ Black/African American ☐ Hawaiian/Pacific Islander	☐ Native Am	erican/Alaskan Native
9.	Emergency	Contact:			
			Name		Phone #
10.	Photo, Vide	o, and Audio C	Consent		
	attending Co programs an material and used for a va or showcase	ornell Cooperative dactivities. Correllor audio clips to the clips to the contract of purposes of programs on	iphs, videos, direct quotes, and/or augle Extension events or participating in nell Cooperative Extension requests that aken of youth and adults involved in es, including, but not limited to, publically our Web sites, showcase of activities all ar lawful purposes.	n Cornell Coope the right to use a these programs cations, promot	rative Extension-sponsored all such photos, videos, print and activities. They may be ional brochures, promotions
	right to use p Cooperative Extension ph form, I acknow	ohotos, videos, o Extension progr notos, videos, di	onsent and give permission to allow Odirect quotes, and/or audio clips that tams or events. I agree to give up my rect quotes, and/or audio clips of menderstand and agree to the above reconstruction.	they have of morights with regal. Further, by sign	e participating in Cornell rds to Cornell Cooperative ning this consent and release