



**GUAM PUBLIC LIBRARY SYSTEM**  
*Sisteman Laibirihan Pubbleko Guahan*  
**Government of Guam**



**(THIS FORM IS TO BE SIGNED IN FRONT OF A LIBRARY STAFF)**

**General Waiver for Volunteers (Minors) APPENDIX 24.4**

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

Date of Birth of Volunteer: \_\_\_\_\_

I do hereby give \_\_\_\_\_ permissions to work as an unpaid member of the  
*Print Name of Volunteer*

staff of the Guam Public Library System. I do hereby release the Guam Public Library System and its administration and staff from any and all liability in the event of any injury or illness while working at the Guam Public library System.

In the event of injury, accident or illness, I release and discharge the Guam Public Library System, and its staff and volunteers from any manner of action and actions, cause and causes of action, suits, damages, claims or demands whatsoever arising out of my serving as an unpaid staff member at the Guam Public Library System, including claim for compensation thereof.

I hereby give to Guam Public Library System and its assignees the rights to photograph, film, videotape, audio record, or any other manner of recording by any other means for purposes of promoting the library and volunteerism. The Guam Public Library System shall have the continuing right to use any photograph or recording in the future without additional compensation to the volunteer or even without identification of me by name.

\_\_\_\_\_  
 Signature of Parent or Guardian \_\_\_\_\_  
 Date

In case of emergency, call: \_\_\_\_\_ at \_\_\_\_\_.

or \_\_\_\_\_ at \_\_\_\_\_.

**General Waiver for Volunteers (Adults)**

I \_\_\_\_\_ do hereby release the Guam Public Library System and its  
*Print Name of Volunteer*

administration and staff from any and all liability in the event of any injury or illness while working at the Guam Public Library System.

In the event of injury, accident or illness, I release and discharge the Guam Public Library System, and its staff and volunteers from any manner of action and actions, cause and causes of action, suits, damages, claims or demands whatsoever arising out of my serving as an unpaid staff member at the Guam Public Library System, including claim for compensation thereof.

I hereby give to Guam Public Library System and its assignees the rights to photograph, film, videotape, audio record, or any other manner of recording by any other means for purposes of promoting the library and volunteerism. The Guam Public Library System shall have the continuing right to use any photograph or recording in the future without additional compensation to the volunteer or even without identification of me by name.

I warrant that I am of legal age and have every right of contract in my own name.

\_\_\_\_\_  
 Signature of Volunteer \_\_\_\_\_  
 Date

In case of emergency, call: \_\_\_\_\_ at \_\_\_\_\_.

or \_\_\_\_\_ at \_\_\_\_\_.