Grant Number: _____

Project Date: _____

Project: _____

Nonprofit: _____

Team Depot Volunteer Participation Agreement

In consideration of my being allowed to participate in the voluntary community service events sponsored by The Home Depot, I, the undersigned, for myself, my heirs, and assigns hereby release and discharge THDF II, Inc. d/b/a The Home Depot Foundation, The Home Depot, Inc., and their affiliates, subsidiaries, directors, officers, employees, associates, and agents (collectively "The Home Depot") and any participating organizations, from any claims for damages or injury I may incur resulting from my participation in the voluntary community service events. I understand that my participation involves risk and that injury or illness may result directly or indirectly from my participation. I further state that I am in proper condition for participating in these events. I agree to abide by the rules established by The Home Depot relative to health and safety requirements. Finally, I grant The Home Depot full and complete permission to use in legitimate promotions of the project photographs of me and quotations from me.

By signing this agreement, I am applying to perform certain volunteer services related to the above referenced project. I acknowledge that my participation is completely voluntary on my part and is being undertaken without promise or expectation of compensation. I further acknowledge that I will provide volunteer services only at times that are convenient to me. I will provide no services related to my regular and usual job duties for The Home Depot, nor will I provide such volunteer services at any time during which I am assigned to perform regular work for The Home Depot.

I understand I shall **ONLY** perform the services assigned to me by my Team Depot Captain. In the event that a homeowner, facility representative, or nonprofit organization requests me to perform a service that has not been assigned to me by my Team Depot Captain, I will first verify such request with my Team Depot Captain before performing such service.

****PLEASE PRINT CLEARLY****

District	Store	Volunteer Name	Emergency Contact Info	First Time Volunteer?
				☐ YES ☐ NO
				☐ YES ☐ NO
				☐ YES ☐ NO
				☐ YES ☐ NO
				☐ YES ☐ NO
				☐ YES ☐ NO
				☐ YES ☐ NO
				☐ YES ☐ NO
				☐ YES ☐ NO
				☐ YES ☐ NO
				☐ YES ☐ NO