



National Organization for  
Disorders of the Corpus Callosum

## 2021 Disorders of the Corpus Callosum Conference VOLUNTEER REGISTRATION FORM

*If completing electronically, simply tab from field to field. Save form to desktop and email to [info@nodcc.org](mailto:info@nodcc.org) or print and fax to 714-693-0808. Thank you!*

First Name	Last Name	T-Shirt Size
Address	City / State / Zip	
Best Phone Number to Reach You	Email Address	

CPR Certified  
 Speak Spanish

**I would like to volunteer at the Disorders of the Corpus Callosum Conference 2021 for the following shifts:**

**Friday June 25**

- 7:30 am – 12:30 pm    
  12:30 pm – 5:30 pm    
  5:00 pm – 9:30 pm

**Saturday June 26**

- 7:30 am – 12:30 pm    
  12:30 pm – 5:30 pm    
  5:00 pm – 9:30 pm

**Sunday June 27**

- 7:30 am – 2:30 pm

### VOLUNTEER WAIVER OF LIABILITY AND HOLD HARMLESS AGREEMENT

I, the undersigned volunteer, am requesting to perform volunteer service for the Disorders of the Corpus Callosum (DCC) Conference. By signing below I swear that I have never been charged or accused of alleged misconduct including, but not limited to, verbal, physical, or sexual abuse or harassment, and that I am a legal adult over the age of eighteen. The National Organization of Disorders of the Corpus Callosum (“NODCC”) is a California non-profit organization located in the State of California dedicated to working with Disorders of the Corpus Callosum. This document shall be interpreted under and pursuant to the laws of the State of California.

Knowing, understanding, and fully appreciating all risks, I hereby expressly, voluntarily, and willingly assume all risks associated with my volunteer service in the conference, including any and all losses, claims, or actions for any damages, theft, personal injury, sickness, disease, or death. The undersigned will pay any and all judgment decrees and costs, including attorney fees which may be rendered against or incurred by the DCC Conference organizers, volunteers, agents, or vendors in all actions or proceedings brought or caused by me.

The undersigned hereby expressly and unconditionally waives and releases NODCC and all of its parents, subsidiaries, affiliates and partnerships, and their respective officers, directors, shareholders, partners, agents and employees, and their respective successors, heirs and assigns and each of them (individually and collectively, the “Released Parties”) from any and all rights and claims against NODCC and/or the Released Parties with respect to my participation and involvement in the DCC Conference and Kids or Teens Camps including but not limited to any alleged or actual negligence and intentional conduct or omissions to the maximum extent allowed under law.

I, the undersigned, acknowledge my image may be photographed, videotaped and/or audio-taped during the Disorders of the Corpus Callosum Conference. I give permission for my photographed and videotaped image, audio recorded and printed survey comments during the conference to be printed, posted and/or published in official publications of the National Organization for Disorders of the Corpus Callosum including but not limited to directories, brochures, website, announcements, and conference materials.

Any dispute or claim in law or equity arising out of this waiver and hold harmless agreement shall be decided by neutral, binding arbitration, except as provided by California law for judicial review of arbitration. The arbitration shall take place in the County of Los Angeles, State of California in accordance with the rules of the American Arbitration Association.

I have read this waiver and release and understand the terms used in it and their legal significance. My signature on this document is intended to bind not only myself but also my successors, heirs, representatives, administrators, and assigns.

Volunteer Name (Print)	Volunteer Signature	Date
* Minor Volunteer Name (Print)	Minor Volunteer Signature	Date
* Minor Volunteer’s Parent Name (Print)	Minor Volunteer’ Parent Signature	Date

*\* Note: all minor volunteers must be over the age of 16 and accompanied by an adult during their volunteer session unless special arrangements have been made with the NODCC Central Office. This form must be signed by minor’s parent.*

Revised 9-15-20

**Mail: NODCC, PMB 363, 18032-C Lemon Drive, Yorba Linda CA 92886 USA**  
**Scan & Email: [conference@nodcc.org](mailto:conference@nodcc.org)**  
**Questions or Further Information: Phone 714-747-0063    Online: [conference@nodcc.org](mailto:conference@nodcc.org)**