

**MIAMI UNIVERSITY**  
**Individual Volunteer Form**

Miami University wishes to thank you for volunteering your valuable time, energy, and talent to the University. Your services will make a significant contribution to the University and our community.

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(Attach copies of any required licenses, certificates, and/or authorizations to act)

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

Address: \_\_\_\_\_

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Telephone Number: \_\_\_\_\_

In the event of an emergency, please contact: \_\_\_\_\_

Emergency Telephone Number: \_\_\_\_\_

Anticipated dates and times of volunteer services: \_\_\_\_\_

a \_\_\_\_\_ . I acknowledge that I am providing these services on a voluntary basis and that I will not be paid for these services. I understand