

AIMS EDUCATION (Main)

4500 New Brunswick Ave
Piscataway, NJ 08854
(908) 222-0002



Excellence & Success

AIMS EDUCATION (Edison)

2672 Woodbridge Ave
Edison, NJ 08837
(908) 222-0002, Ext. 400

Volunteer Form for Phlebotomy
Release and Indemnity Agreement

Volunteer Name: _____

Phone: _____

Address: _____

DOB: _____

Student Name: _____

I, being 18 years of age or older, hereby acknowledge and agree to participate in venous blood sampling and/or injection practicum where venous blood will be drawn from me by venipuncture or finger stick. I am in proper medical and physical condition to participate as a phlebotomy volunteer, and I acknowledge and understand that this document serves as a release form which will allow me to actively participate in the aforementioned training.

I am well aware of the possible complications, discomfort, and risks that may arise during phlebotomy training. I also acknowledge that the students performing the procedures are inexperienced and presently learning phlebotomy.

I hereby release and discharge and agree to hold harmless and defend, AIMS Education, its officers, directors, employees, and affiliates from and against any and all injuries, claims, damages, liabilities, costs, and expenses whatsoever, including reasonable attorney fees, which I or anyone on my behalf may claim to have arisen or occurred in connection with my participation in the lab training.

This release shall be binding upon me and anyone who succeeds to my rights and responsibilities, such as my heirs, personal representatives, or the executor of my estate.

Volunteers, age 16 or 17, are permitted to volunteer with the permission of a parent or guardian. By signing this agreement, the parent or guardian acknowledges the information provided above and agrees on behalf of the volunteer. Volunteers under 18 are only permitted to volunteer for the student listed on this agreement.

Volunteer Signature (18 years old or older)

Date

Name of Parent or Guardian

Parent or Guardian Signature

Date

Instructor Name

Instructor Signature

Date