



Komen Community Ambassadors



Who are the Ambassadors?

These individuals are a group of breast cancer survivors who have been chosen from our Affiliate service area of **Greater Nashville, Upper Cumberland, Chattanooga and North Georgia Regions** to be representatives for the **faces of breast cancer**. They are advocates for the Komen mission to find the cures and end breast cancer forever.

The Ambassador program represents different ages, genders, ethnicities, races and communities through sharing their stories, volunteerism, spreading education and increasing awareness. The Community Ambassadors know first-hand how important it is to have support, information, education, and hope.

The intention of this program is to help those who have been recently diagnosed, their support systems, those who are in need of strength and even those who simply need to hear someone else's breast cancer journey to know that they are not alone.

In What Ways Can I Share My Story?

We understand that fighters and survivors have all encountered breast cancer differently; because of this, not everyone is ready to share their story, and some may never be. **Breast cancer effects everyone differently**; this is one of the main reasons why the Komen Community Ambassadors program exists.

This disease can affect anyone, regardless of their family history, lifestyle or stage of life. Being able to learn about others breast cancer experiences can help someone through their own journey.

There are many ways you can **participate** such as:

1. **Sharing** your story through radio ads, television commercials, magazines, newspaper articles, Komen Central Tennessee's website, social media or public speaking events.
2. **Volunteering** in the office, at health fairs or through our community events throughout the year such as Fit for the Cure or the More Than Pink Walk.
3. Participating in **focus groups** to help us learn more about your journey and how we can most effectively serve the breast cancer community.

Breast cancer touches us all, directly and indirectly, and knowing that there are others out there who share the same thoughts and concerns about breast cancer is extremely important.

If you are interested in joining this program, please contact us at info@komencentraltennessee.org or contact Dana Niven at (615) 383-0017.

Komen Ambassador Information Sheet

Name: _____

Address: _____

Email: _____

Home Phone Number: _____

Cell Phone Number: _____

T-Shirt Size: _____

Shoe Size: _____

Please check all that you are willing to participate in:

- Photo Media Opportunities
- Public Speaking
- Newsprint Articles
- Magazine Articles
- Television
- Radio
- Public Appearance at Community Events
- Fundraising
- Video

Please check all that you are willing to volunteer for:

- Health Fairs
- Community Events (health fairs, Fit for the Cure)
- Office Support
- More Than Pink Walk
- Committees

Please check all that you feel you need training/mentoring in:

- Breast Cancer Education/Information
- Public Speaking
- Awareness of the Komen Mission
- Specifics about Komen Central Tennessee
- Fundraising

Please check all the dates and times that you are available to advocate*:

- Monday AM PM
- Tuesday AM PM
- Wednesday AM PM
- Thursday AM PM
- Friday AM PM
- Saturday AM PM
- Sunday AM PM

*Hours may vary week to week

Please list any other organizations you are actively engaged with:

Have you participated in the Komen Chattanooga, Greater Nashville, or Upper Cumberland Race for the Cure? Do you plan to participate in the More Than Pink Walk in October of 2019?

Do you currently participate in any other fundraising events for Komen? If so, please list:

Emergency Contact Information

Emergency Contact Name: _____

Relationship: _____

Phone Number: _____

Do you have any health issues that we should be aware of?



Komen Community Ambassador

Disclosure/Declarations Page

I certify that I have not been charged with or convicted of any crime, excluding petty misdemeanors (e.g. traffic violations).

Signature: _____

Date: _____

If you cannot certify such, you may write below or attach any explanations of any criminal charges or convictions, including the date, the nature of the charge, and the outcome of the proceedings.

This is but one consideration in your candidacy to serve as part of the Komen Community Ambassadors. Criminal charges and convictions do not automatically disqualify you for consideration.

Photo and Video Release and Authorization

AUTHORIZATION AND RELEASE I, _____, hereby grant The Susan G. Komen Breast Cancer Foundation, Inc. d/b/a Susan G Komen for the Cure®, its affiliates, sponsors, corporate sponsors, successors, licensees, and assignees (collectively, "Komen") my full consent, permission and absolute and irrevocable worldwide right to use my photograph, personal statements (e.g., quotes and stories), film, videotape, or other recordings of my likeness, voice and performance (collectively, "Materials") for any purpose whatsoever and without compensation. In addition to all rights conferred hereunder, I also hereby grant Komen my full consent, permission and absolute and irrevocable worldwide right to use my name in connection with any of the Materials. I hereby assign and transfer to Komen all right, title and interest that I may have in the Materials and all intellectual property rights therein, in all formats and media, whether now known or subsequently created, in perpetuity, without reservation, condition or limitation. I hereby waive or release any moral rights (including any rights of paternity or integrity, any right of restraint, any right to claim authorship of the Materials (or any component thereof), and to object to any distortion, mutilation or other modification of, or other derogatory action in relation to, the Materials), whether or not such would be prejudicial to my honor or reputation, and any similar right, existing under judicial or statutory law. I will execute such other assignments or instruments as Komen may, from time to time, deem reasonably necessary or desirable to evidence, maintain, protect, enforce or defend Komen's right, title and interest in and to the Materials. I hereby represent that the Materials and any use of the Materials by Komen will not infringe on any copyright, trademark, trade secret, patent or other intellectual property right or any moral right of any third party. I recognize that upon my execution of this Authorization and Release, Komen shall be the sole owner of the Materials, including, but not limited to, any negatives, outtakes, sounds and related images. If I am engaged by, or otherwise paid to perform an activity for Komen, I hereby agree that the Materials shall be considered "works made for hire" under all copyright laws. I hereby release, discharge and hold harmless Komen from, and agree not to sue Komen for, any claim or cause of action, whether known or unknown, for libel, defamation, invasion of privacy, right of publicity, or any other claim or cause of action, based upon or relating to the use of the Materials or the exercise of any of the rights that I have granted to Komen hereunder. I hereby waive any right to (i) inspect or approve Komen's use of the Materials; and (ii) receive any royalties or other compensation arising from or related to the Materials. I hereby certify that I am at least 18 years of age and that this Authorization and Release is accepted voluntarily, under no duress, and without expectation of compensation in any form. I understand that Komen is relying on my representations herein, and I understand that my participation with Komen is conditioned on my abiding by the terms of this Authorization and Release. Therefore, I agree to indemnify and hold Komen harmless from and against any and all liabilities, losses, claims, demands, costs (including reasonable attorneys' fees) and expenses arising in connection with any breach by me of any of the above representations, warranties or agreements hereunder. I acknowledge that this Authorization and Release shall be governed by the laws of the State of Texas and the laws, regulations and treaties of the United States of America without regard to any conflicts of law principles, and in the event of any dispute or breach, my damages (if any) will not be irreparable or otherwise sufficient to entitle me to seek injunctive or other equitable relief. This Authorization and Release contains the entire understanding and agreement of the parties relating to the subject matter and cannot be amended except by a written instrument signed by the parties hereto.

PRINTED NAME: _____

Signature: _____

Date: _____

Volunteer Release/Waiver

I wish to volunteer for Susan G. Komen Chattanooga Affiliate. I understand that my consent to these provisions is given in consideration for being permitted to volunteer. I UNDERSTAND THAT THE NATURE OF MY VOLUNTEER ACTIVITIES MAY INVOLVE PHYSICAL ACTIVITY, CONTACT WITH UNIDENTIFIED OR UNFAMILIAR PERSONS, OR OTHER POTENTIAL RISK OF BODILY INJURY OR DAMAGE TO PROPERTY, AND I HEREBY VOLUNTARILY ASSUME FULL AND COMPLETE RESPONSIBILITY FOR, AND THE RISK OF, ANY INJURY OR ACCIDENT WHICH MAY OCCUR DURING MY VOLUNTEER WORK. TO THE FULLEST EXTENT OF THE LAW, I, FOR MYSELF, MY NEXT OF KIN, MY HEIRS, ADMINISTRATORS AND EXECUTORS (COLLECTIVELY, "RELEASORS"), HEREBY RELEASE AND HOLD HARMLESS AND COVENANT NOT TO FILE SUIT AGAINST THE AFFILIATE, THE SUSAN G. KOMEN BREAST CANCER FOUNDATION, INC. ("KOMEN HQ"), AND ALL OTHER AFFILIATES OF KOMEN HQ AND THEIR RESPECTIVE DIRECTORS, OFFICERS, VOLUNTEERS, AGENTS, EMPLOYEES, VENDORS, CONTRACTORS AND PARTNERS (COLLECTIVELY, "RELEASEES") FOR ANY INJURY OR DAMAGES I MIGHT SUFFER IN CONNECTION WITH MY VOLUNTEER WORK. THIS RELEASE APPLIES TO ANY AND ALL LOSS, LIABILITY, OR CLAIMS I OR MY RELEASORS MAY HAVE ARISING OUT OF MY VOLUNTEER WORK WITH THE AFFILIATE, INCLUDING BUT NOT LIMITED TO, PERSONAL INJURY OR DAMAGE SUFFERED BY ME OR OTHERS, WHETHER SUCH LOSSES, LIABILITIES, OR CLAIMS BE CAUSED BY CONTACT WITH AND/OR THE ACTIONS OF OTHER PERSONS, CONTACT WITH FIXED OR NON-FIXED OBJECTS, NEGLIGENCE OF THE RELEASEES, RISKS NOT KNOWN TO ME OR NOT REASONABLY FORESEEABLE AT THIS TIME, OR OTHERWISE.

I understand that as a volunteer, I may become privy to confidential information about a Releasee. I agree to maintain the confidentiality of any information marked confidential, as well as any information about each Releasee's business operations, employee information, financial operations, marketing strategy, donor information, events, current or proposed business transactions and sponsorships, and any proprietary information such as computer software and programming that is not otherwise publicly disclosed. I will not use any confidential information in any manner that would be detrimental to a Releasee. At all times during my volunteer work, I will conduct myself in such a manner as not to reflect unfavorably on or in any way diminish the reputation of the Affiliate, Komen HQ and its affiliates. I give my consent and permission to the Affiliate, Komen HQ and their respective affiliates, successors, licensees, and assign the irrevocable right to use, for any purpose whatsoever and without compensation, any photographs, videotapes, audiotapes, or other recordings of me that are made during the course of my volunteering.

This Release shall be construed under the laws of the state in which the Affiliate is located. In the event any provision of this Release is deemed unenforceable by law, (i) the Affiliate shall have the right to modify such provision to the extent necessary to be deemed enforceable; and (ii) all other provisions of this Release shall remain in full force and effect. I understand that I have given up substantial rights by accepting this Release, and have signed it freely and voluntarily without any inducement, assurance or guarantee being made to me and intend my acceptance to be a complete and unconditional release of liability to the greatest extent allowed by law. This Release extends to claims and facts unknown and unsuspected to exist at the time of executing this Release. All rights under Section 1542 of the California Civil Code are hereby expressly waived with respect to any of the claims, injuries, or damages described in this Release. Section 1542 of the California Civil Code reads as follows: A GENERAL RELEASE DOES NOT EXTEND TO CLAIMS WHICH THE CREDITOR DOES NOT KNOW OR SUSPECT TO EXIST IN HIS FAVOR AT THE TIME OF EXECUTING THE RELEASE, WHICH IF KNOWN BY HIM MUST HAVE MATERIALLY AFFECTED HIS SETTLEMENT WITH THE DEBTOR.

Printed Name of Volunteer: _____

Volunteer's Signature: _____

Parent's or Guardian's Signature: _____

(If volunteer is under age 18)

Date: _____