

Registration and Acknowledgment Form
for Volunteer Participation with
The Texas Matthew 25 Team Prison Ministry Event
(Rev 7/18/26)

I recognize that it is both a privilege granted by the Texas Department of Criminal Justice (TDCJ), the Unit Warden, and the Unit Chaplain, and most importantly, the call of the Lord to enter and minister within TDCJ prisons and jails. I will bear in mind at all times that we are in “their house,” and commit always to exemplifying Christian behavior, integrity, and humility.

I affirm that I will comply with all TDCJ rules and all directions issued to me by any staff of TDCJ. I also affirm that I will abide by all guidelines for safety, compliance, and behavior established by The Texas Matthew 25 Team as detailed in ***Prison Directives*** (Rev 5/3/26) while participating in any event.

I realize that all Units that I may enter have substantial safety measures in place, but all ministry opportunities have inherent risks. I pledge that I will not hold accountable for any injury or loss the Texas Department of Criminal Justice, The Texas Matthew 25 Team, nor any directors, officers, employees, or volunteers of either organization. I hereby indemnify all such parties.

I affirm that I am not currently on parole and have not been incarcerated within the past six months (unless I have a current parole officer approval letter on file with TDCJ).

I affirm that I have no personal friends, family members, or enemies incarcerated in any TDCJ Unit in which I will serve.

I affirm that my most recent training completion date as a TDCJ chapel volunteer is _____.

I commit to renewing my TDCJ volunteer credentials at least every 24 months for as long as I participate with The Texas Matthew 25 Team.

- I HAVE CAREFULLY READ THIS AGREEMENT.
- I UNDERSTAND THAT I ASSUME ALL RISKS INHERENT IN THIS MISSION.
- I UNDERSTAND THAT THIS AGREEMENT IS A RELEASE OF ALL CLAIMS, INCLUDING THE NEGLIGENCE OF THE TEXAS DEPARTMENT OF CRIMINAL JUSTICE AND THE TEXAS MATTHEW 25 TEAM.
- I UNDERSTAND THAT I AM INDEMNIFYING BOTH ORGANIZATIONS AND ALL OF THEIR AGENTS.

I VOLUNTARILY SIGN MY NAME EVIDENCING MY UNDERSTANDING AND ACCEPTANCE OF THE PROVISIONS OF THIS AGREEMENT.

Printed name of Participant

Signature of the Participant

Date