



RIVERWORKS
AT STURGEON CITY

Volunteer Application

First name: _____ Last name: _____

Nickname: _____ DOB: ____/____/____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone number: _____ (Circle One) Home Cell
Work

Email Address: _____

Skills & Interests

Please select all of the following that you are interested in:

<input type="checkbox"/>	Accounting	<input type="checkbox"/>	Administrative Assistance	<input type="checkbox"/>	Handy work
<input type="checkbox"/>	Graphic Designer	<input type="checkbox"/>	Aquarist/Water Quality	<input type="checkbox"/>	Arts and Crafts
<input type="checkbox"/>	Audio/visual	<input type="checkbox"/>	Boating/Sailing	<input type="checkbox"/>	Chef/Catering Experience
<input type="checkbox"/>	Fundraising & Development	<input type="checkbox"/>	CPR & First Aid	<input type="checkbox"/>	Marine or freshwater biology
<input type="checkbox"/>	Photographer	<input type="checkbox"/>	Good with kids	<input type="checkbox"/>	Writing & Editing/Proofreading
<input type="checkbox"/>	Education/Teaching	<input type="checkbox"/>	Horticulture or landscaping	<input type="checkbox"/>	Volunteer coordination
<input type="checkbox"/>	Entertainer/Actor	<input type="checkbox"/>	Event Planning	<input type="checkbox"/>	Special Events
<input type="checkbox"/>	Singing	<input type="checkbox"/>	Sign language	<input type="checkbox"/>	Special Needs/Education
<input type="checkbox"/>	Training	<input type="checkbox"/>	Web design	<input type="checkbox"/>	Veterinarian/Vet Tech
<input type="checkbox"/>	Videography	<input type="checkbox"/>	Other (please list):		

Availability

Please indicate the days and time periods you are usually available to volunteer.

	Sun	Mon	Tue	Wed	Thu	Fri	Sat
AM:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
PM:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Notes:**Employment**

If you are currently employed, please list the name of your company or business. If you are retired or a homemaker, please indicate so.

Employer: _____ Position: _____

Phone number: _____

Emergency Contact Information

In the event of a personal emergency, please provide your emergency contact information.

First name: _____ Last name: _____

Phone number: _____ Relationship: _____

How did you hear about this volunteer opportunity?

Please tell us how you first heard about volunteering at the Riverworks at Sturgeon City.

Notification and Agreement**Notification and Agreement**

I certify that all answers given by me are true, accurate and complete. I understand the falsification, misrepresentation or omission of fact on this application (or any other accompanying or required documents) will be cause for denial or immediate termination regardless of when or how discovered. I also agree to immediately notify Riverworks at Sturgeon City if I should be convicted of a crime involving dishonesty, breach of trust, controlled substances, sexual misconduct, abuse or violence while my application is pending or during my period of volunteer service.

QUESTIONS:

Questions regarding this application should be directed to info@riverworksatsturgeoncity.org. This application will be given every consideration, but its receipt does not imply that the applicant will be accepted.

EQUAL OPPORTUNITY:

It is the policy of Sturgeon City of Jacksonville NC, Inc to afford equal opportunity to all volunteer applicants without regard to age, race, religion, color, sex, national origin, marital status, expunged juvenile records, or pregnancy, and to afford equal opportunity to disabled veterans, veterans of the Vietnam era, and individuals with a disability and any other characteristics protected by Federal, State, or Local Law. Riverworks at Sturgeon City is committed to a drug/alcohol free workplace and prohibits any form of harassment.

RELEASE:

I authorize any person, school, current employer, past employer(s), and organizations named in this application to provide the Sturgeon City of Jacksonville NC, Inc with any information and opinion request in connection with my application, and I release such persons and organizations from any legal liability in making such statements.

NO EMPLOYEE BENEFITS:

I shall not be considered an employee for any purpose, and no health, accident or workmen's compensation insurance, nor any type of employee benefits, shall be provided for me by Sturgeon City of Jacksonville NC, Inc.

TRAINING:

I understand that certain volunteer activities require special training. I shall not undertake such activities without the required training. I also understand that my volunteer activities will not qualify me for any paid professional position.

CONFIDENTIAL INFORMATION:

I understand that information obtained through my work as a volunteer may be considered privileged or proprietary information of Sturgeon City of Jacksonville NC, Inc. I agree to keep all such information confidential except to the extent disclosure of such information is expressly authorized and directed by an official of Sturgeon City. In particular, I agree to make no statements or release any information about Sturgeon City to any news media except as expressly authorized by Riverworks at Sturgeon City.

RELEASE FROM LIABILITY:

I hereby release the Sturgeon City of Jacksonville NC, Inc and their respective agents, representatives, trustees, officers, employees and volunteers (the "Released Parties") from any and all liability whatsoever arising out of any damage, loss or injury to me or my property incurred as a result of my volunteer activities for Riverworks at Sturgeon City. I further agree to indemnify, save and hold harmless the Released Parties from any and all losses, damages and liabilities for indemnities, contribution or otherwise with respect to any and all property damage, personal injury and/or death incurred in connection with my volunteer activities, as might be asserted by a third party (defined as any party other than the Released Parties or me). My estate shall hold harmless Sturgeon City of Jacksonville NC, Inc and their respective agents, representatives, trustees, officers, employees and volunteers from any claims or actions by my relatives or legal representatives based on my death or injury as a result of my volunteer activities.

PERMISSION TO TAKE AND USE PHOTOGRAPHS:

I acknowledge that Riverworks at Sturgeon City might from time to time take photographs of its volunteers during various programs and activities and that such photographs might be used in brochures and program advertising (the "Photographs"). I further acknowledge that as a result of my volunteer work and/or presence at Riverworks' premises, my image might from time to time be included in the Photographs. I hereby authorize the Sturgeon City of Jacksonville NC, Inc and its agents to take, use, display, publish, reproduce, and distribute any and all Photographs that include my image and to create derivative works based upon all such Photographs.

ACCEPTANCE OF RIVERWORKS POLICY:

I understand that this application does not create a contract for my volunteer service. I understand that if accepted, I am obliged to comply with any and all current and subsequently adopted policies. I understand that if accepted, my volunteer service may be dismissed at any time for any reason, with or without notice. I understand that no person is authorized to change any of the terms mentioned in this application. By typing/signing your name to this document, you hereby agree to all the terms/conditions listed above.

Volunteer's Signature: _____ Date: _____

Legal Guardian (if under 18): _____ Date: _____