## **APPLICATION FORM - VOLUNTEERS**

Name:				
Address:				
City:	State:	Zip:	E-mail:	
Home Phone:			Cell Phone:	
What time are you availabl	e?	V	/hat day(s) are you ava	ilable?
Are you a [ ] student [ ] e	employed [ ] retired	and whe	re?	
Do you plan to receive sch	ool credits? If so, how	w many hours	are needed?	By when?
[ ] Athletic Club [ ] Neig	] Library [ ] GPAC hborhood Services	[ ] Economic	& Community Develor	oment
If NO, please have y	our Parent / Legal Gu at the City of German	ardian sign th	et accept volunteers you	
Are you [ ] 14 – 1	5 years old, OR [	] 16 – 17 yea	ars old?	
Prior volunteer work experi	Recreating [ ] Library [ ] GPAC [ ] Police [ ] Fire [ ] Animal Shelter Elub [ ] Neighborhood Services [ ] Economic & Community Development  Bears or older? [ ] YES [ ] NO please have your Parent / Legal Guardian sign the bottom section of page 2.  Please note that the City of Germantown does not accept volunteers younger than 14 years. Ou [ ] 14 – 15 years old, OR [ ] 16 – 17 years old?  Ber work experience:			
List your special hobbies, s	skills, and talents:			
What languages do you sp	eak fluently?			
How did you hear about us	?			

What would you like to learn from	m your volunteer experience?			
Have you volunteered for the Cit Details:	ty before? [ ] YES [ ] NO Date:			
	al or employee? [ ] YES [ ] NO artment and Relationship:			
Do you possess a valid driver's I	icense? []YES []NO			
For what state?	Expiration Date:	Class:		
•	f or arrested for a crime? Include convictions lease describe the conviction (s), Include Dat			
volunteer positions that respond to employees, volunteers and the comconviction of a crime. The nature of of the offense to the position will be		ring the safety of the City's us solely on the grounds of		
EMERGENCY CONTACT INFO		Palatianahin		
Home Phone:	Cell Phone:	Cell Phone:		
agree that my volunteer status can	plication, I agree to adhere to the policies and reg be terminated, with or without cause, and with or conform to the City's drug-free workplace policy of Germantown.	without notice, at any time by the City		
I do acknowledge and accept that u public record upon receipt by the Ci fully developed or not, against the C release, authorized or unauthorized	tion provided herein is Public Record and is subje- inder Tennessee Law any information, with the ex- ity of Germantown. I hereby waive any rights or cl City of Germantown or its agents or employees, and I, of the information received pursuant to or in con- etc. of my application for employment with the Ci	ception of medical, will become aims I may have whether presently ising out of, or resulting from the nection with the City of Germantown		
SIGNATURE:		DATE:		
PARENT / LEGAL GUARDIAN:				
Parent / Legal Guardian's perr	mission and age verification is required fo	r all minor volunteers under 18		
years. I verify that my child is Germantown.	years old and has my permis	sion to volunteer for the City of		
Parent / Guardian's Signature: _		Date:		
Parent / Guardian's Printed Nam	ne:			

## CITY OF GERMANTOWN VOLUNTEER ACKNOWLEDGMENT AND RELEASE FORM

I, the undersigned, hereby acknowledge that I have been accepted by the City of Germantown or one of its affiliates as a volunteer. I agree that I am not an employee and am not entitled to any compensation or benefits from the City or its affiliates for the volunteer services I will perform.

I agree that I have no right as a volunteer and that the City or its affiliates may, in its sole discretion and for any reason, withdraw its approval for me to work as a volunteer.

I acknowledge my obligation to refrain from any conduct that is inconsistent with my volunteer status, including, without limitation, engaging in violence or threats of violence, theft or destruction of City property, or sexual or other forms of harassment.

I agree that if I am subject to violence, threats of violence, harassment or any other inappropriate conduct, by any person, I will report it immediately to <u>Susan Hopson, Human Resources Director</u> at (901) 757-7274 or shopson@germantown-tn.gov

In consideration for my (or my minor children's) being permitted to volunteer for the City, I hereby expressly assume all risks and hazards incidental to my (or my minor children's) participation in volunteer activities for the City and assume full responsibility for all risks of bodily harm and property damage resulting from or in connection with my (or my minor children's) participation in the volunteer activities. I, for myself, my heirs, my minor children (if volunteer is a minor) and my personal representatives, hereby (1) release, discharge and agree to indemnify and hold harmless, the City of Germantown, its affiliates, its elected officials, and the respective officers, employees, representatives and agents of the City and its affiliates (hereinafter collectively "the City"), from any and all liability, including attorneys' fees and court costs, arising out of my (or my minor children's) participation in volunteer activities for the City, including, without limitation, liability for any claims or causes of action whatsoever arising out of any damage, loss, or injury (including death), to me (or my minor children) or to property owned by me or in my (or my minor children's) custody while engaged in such activities, and (2) agree to indemnify, defend and hold the City harmless from and against any and all liability, including attorney's fees and courts costs, for personal injury or property damage to any person or entity resulting from or related to my (or my minor children's) participation in the volunteer activities.

Signature	Date		
(by parent / legal guardian if volun	dian if volunteer is under 18 years)		
Full Name (please print)	<del></del>		
Address			
Davtime Phone Number			