

Seabrook Recreation Department
Junior Volunteer Application
Age 13-15 requires NH Youth Employment Certificate
Age 16-17 requires parental permission.

Date _____

Name _____

Home Address _____

Email: _____ Home #: _____ Mobile #: _____

School and grade _____

When would you like to start? _____ What days and times are you available for work?

Mon @ _____ Tues @ _____ Wed @ _____ Thur @ _____ Fri @ _____ Sat @ _____

Why do you want to volunteer? [or What do you want to gain from this volunteer experience?]

List any skills you have (Typing, writing, artwork, etc.)

Do you have: a driver's license? No Yes

EMERGENCY CONTACTS:

<u>Name</u>	<u>Relationship to You</u>	<u>Phone</u>
1. _____		
2. _____		

Please read the following carefully before signing this application:

I understand that this is an application for and not a commitment or promise of volunteer opportunity.

I certify that I have and will provide information throughout the selection process, including on this application for a volunteer position and in interviews with the Seabrook Recreation Department that is true, correct and complete to the best of my knowledge. I certify that I have and will answer all questions to the best of my ability and that I have not and will not withhold any information that would unfavorably affect my application for a volunteer position. I understand that information contained on my application will be verified by the Seabrook Recreation Department. I understand that misrepresentations or omissions may be cause for my immediate rejection as an applicant for a volunteer position with the Seabrook Recreation Department or my termination as a volunteer.

CONFIDENTIALITY AGREEMENT

I understand that it is the policy of the Seabrook Recreation Department to protect the privacy of Recreation Department users. I agree to hold all information about patrons in complete confidence and to access this information only in the course of my work duties. In addition, I understand that a breach of confidentiality is grounds for immediate dismissal.

LIABILITY RELEASE

I understand that a background check will be conducted on me. I hereby grant permission to the custodian of any relevant information on my character or experience to release same to the Seabrook Recreation Department. This authorization is made voluntarily, for the purpose of employment only. I agree to hold harmless any individual or agency involved with the release of this information.

It is expressly understood that volunteer services shall be donated, and that I am not entitled to nor should I expect any present or future salary, wages, or other benefits for these voluntary services. I agree that I will not be considered to be an employee of the Recreation Department, for any purpose other than tort claims and injury compensation, while performing these voluntary services.

I understand that if I am responsible for injuries to third parties or damages to their property while acting outside the scope of assigned volunteer duties, that I may be held personally liable for any monetary damages a court may award to the injured party.

I also understand and agree that the services rendered to the Recreation Department shall apply only in the case of liability arising out of the ordinary negligence that occurs during the scope of my volunteer service agreed to herein, and that in no way do any of these provisions apply for the my benefit, my heirs, executors or administrators in any action arising out of gross negligence, willful misconduct, or any other conduct on my part, which cause or may give rise to criminal liability.

I further agree that I will fully cooperate with the Recreation Department and its agents in any investigation, lawsuit, arbitration, or any other legal or quasi-legal proceedings that arise from the matters covered by this agreement. I further agree to notify the Recreation Department immediately of any incident that occurs or may occur within my knowledge, which gives rise to liability on my part.

I agree to follow the supervision and direction of any employee I have been assigned to, and to participate in any training required by the Recreation Department in order to perform these voluntary services. I understand that my volunteer assignment may be terminated at any time by either party to this agreement.

Signature _____ Date _____

PERMISSION OF PARENT OR GUARDIAN FOR YOUTH VOLUNTEER AT SEABROOK RECREATION DEPARTMENT

I consent to allow _____ to work as a volunteer at the Seabrook Recreation Department. I understand that I am responsible for getting my child to and from the Recreation Department on the days they volunteer. I will pick my child up promptly at the designated time. I understand that the Recreation Department is not held responsible in case of an accident. If my child will not be able to attend his/her regular work time, I will call or have my child call 474-5746 and let the designated Supervisor know in advance.

Parent or Legal Guardian Name and Contact Information (Please print)

Phone #: _____ Email: _____

Parent or Legal Guardian Signature

_____ Date _____