GREENSBORO URBAN MINISTRY

Volunteer Application

(Please Print)

Name_____ Today's Date _____
(FIRST) (MIDDLE/MAIDEN) (LAST)

Mailing Address _____

_____
(City) (State) (Zip Code)

Current Address (if different from mailing address) _____

_____
(City) (State) (Zip Code)

Telephone (Home)_____(Work)_____(Cell) _____

E-Mail Address_____Date of Birth_____

Employer ☐**retired** ☐**previous** ☐**current**_____

Church or Religious Community **(optional)**_____

Groups, Clubs, Organizational Memberships _____

Special Training, Skills, Hobbies _____

Highest Level of Education (include school and major) _____

Current or Previous Volunteer Experience (include organization names and dates of service)

_____

_____

How did you hear about Greensboro Urban Ministry (GUM)? _____

_____

What prompted you to volunteer at this time? _____

_____

Do you have friends or relatives currently volunteering or working at Greensboro Urban Ministry? □Yes □No
If Yes, name the person(s) and department he/she volunteers/works:

_____

Have you ☐**lived**, ☐**worked**, ☐**volunteered** or ☐**received services** at GUM previously ☐Yes ☐No
If yes, name which department(s)/year(s)_____

If you have ☐**worked** or ☐**volunteered** previously at GUM, please state reason for leaving

_____

Have you ever been **convicted** of a crime? ☐Yes ☐No, If Yes, in what State? _____
If Yes, please explain:_____

Do you have Pending Court Charges? ☐Yes ☐No_____

Are there any restrictions or limitations that we should be aware? _____

COMPLETION OF THIS APPLICATION DOES NOT GUARANTEE PLACEMENT

GREENSBORO URBAN MINISTRY

Emergency Contact Form

Volunteer_____

Please list person(s) that you would like contacted in case of Emergency

Emergency Contact: **Relationship to Contact**

_____ _____

Phone: _____ _____ _____
(Home) (Cell) (Work)

Address: _____

_____
(City) (State) (Zip Code)

E-Mail:_____

Emergency Contact: **Relationship to Contact**

_____ _____

Phone: _____ _____ _____
(Home) (Cell) (Work)

Address: _____

_____
(City) (State) (Zip Code)

E-Mail:_____

CONFIDENTIALITY STATEMENT

I understand that all information regarding clients of Greensboro Urban Ministry is confidential. I hereby promise that I will not disclose any confidential information concerning the relationships between the ministry, its clientele, staff and volunteers.

I will not remove from the office any written records or copies thereof. Any written (audio/or video) records I may be responsible for producing shall be and remain part of the ministry files.

I accept full responsibility for maintaining the confidential and private nature of all records and information. I understand that I cannot record (audio/or video) or take pictures of staff, clients, children or volunteers without their expressed verbal or written authorization. In the case of a minor, the authorization has to be written authorization by a legal guardian.

I understand and agree that I will discuss cases assigned to me only with designated staff, volunteers, or agency representatives.

Any breach of confidentiality could result in dismissal or termination of the volunteer assignment.

Signature Volunteer	Printed Name of Volunteer	Date

Address	City	State	Zip Code

Telephone	Mobile	E-mail Address

The signature of the volunteer's parent/guardian is **REQUIRED** if the volunteer is **under 18** years of age. Parent/guardian's signature shall constitute consent to the terms contained herein on behalf of the Minor/Ward. The parent or legal guardian who signs this agreement on behalf of a minor, incapacitated and/or mentally challenged person (hereinafter, "Said Person"), hereby acknowledges that he or she had the legal capacity and authority to act on behalf of Said Person to legally bind Said Person to this agreement. The parent or legal guardian who signs this agreement agrees to indemnify and hold harmless the GUM and its agents for any expenses incurred, claims made, or liabilities assessed against GUM, as a result of any insufficiency or legal capacity or authority to act on behalf of Said Person in the execution of this agreement.

Read, Understood, and Agreed to by:

Signature of Parent/Guardian	Printed Name of Parent/Guardian	Date

GREENSBORO URBAN MINISTRY

VOLUNTEER WAIVER & RELEASE

Please read this form carefully and be aware that in acting as a Volunteer with Greensboro Urban Ministry (hereinafter, "GUM") or as a result of GUM's placement services, you will be expressly assuming the risk and legal liability along with waiving and releasing all claims for injuries, damages or loss which you or your minor child/ward might sustain as a result of volunteering.

WARNING OF RISK

Volunteers and the parents/guardians of minor volunteers must recognize that there is an inherent risk of injury when choosing to participate in a volunteer activity. Volunteer activities often challenge and engage the physical, mental and/or emotional resources of each volunteer. The volunteer is solely responsible for determining if you or your minor child/ward is physically and/or adequately skilled to perform volunteer activities. It is always advisable that a volunteer consult with their physician before performing any volunteer service that involves physical activity. There are certain risks inherent in participating in any volunteer activity, including but not limited to slips, falls, carelessness, horseplay, poor conditioning, premise defects, inadequate or defective equipment. Since all hazards and dangers cannot be foreseen or mitigated, it is impossible for GUM to guarantee the volunteer's absolute safety.

ASSUMPTION OF RISK, WAIVER, RELEASE, & INDEMINIFICATION OF ALL CLAIMS

In consideration of the opportunity to have my application to participate in volunteer activities and/or utilize the placement services of Greensboro Urban Ministry (hereinafter, "GUM") reviewed, I hereby agree to the following:

1. I, the undersigned, am applying to participate in a volunteer activity, and as such I acknowledge that I will not be paid for my service, that I will not be covered by any medical or other insurance coverage provided by GUM, and that I will not be eligible for any Workers compensation benefits.
2. I, the undersigned, do hereby, voluntarily with knowledge, assume all risk of accident or damages to my person or my property which may be incurred from or be connected in any manner with my volunteer service or my participation with GUM.
3. I, the undersigned, do hereby and for his heirs, executors, administrators, legal representatives, successors, and assigns release, acquit, and forever discharge GUM, its affiliated organizations, agents, and GUM's officers or directors, collectively or individually, (hereinafter, "Released Parties") of and from any and all claims, actions, cause of action, demands rights, damages, costs, expenses, and other compensation whatsoever, which the undersigned has or which may hereafter accrue on the account of or in any way growing out of any and all known and unknown, foreseen and unforeseen, damage to my personal property, personal injury, or death to me sustained in connection with my participation with GUM whether caused by negligence of the Released Parties or otherwise.
4. I, undersigned, further covenant and agree not to sue any of the Released Parties for any of the claims that I have waived, released, or discharged herein. I agree to indemnify and hold harmless the Released Parties from any and all expenses incurred, claims made, or liabilities assessed against them, including but not limited to attorneys' fees and litigation expenses, arising out of or resulting from, directly or indirectly, in whole or in part, my breach or failure to abide by any part of this agreement, and my actions or inactions which cause injury or damage to any other person.
5. I further expressly agree that the foregoing release, waiver, and indemnity agreement is intended to be as broad and inclusive as permitted by the laws of the State of North Carolina and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect. Furthermore, it is agreed that any action brought against the Released Parties shall be brought in either the state or federal courts located inside the State of North Carolina.

I HAVE READ, UNDERSTOOD, AND AGREED TO THE ABOVE IMPORTANT INFORMATION, WARNING OF RISK, ASSUMPTION OF RISK, AND WAIVER AND RELEASE OF ALL CLAIMS INCLUDING NEGLIGENCE.

Signature Volunteer	Printed Name of Volunteer	Date

Address	City	State	Zip Code

Telephone	Mobile	E-mail Address

The signature of the volunteer's parent/guardian is **REQUIRED** if the volunteer is **under 18** years of age. Parent/guardian's signature shall constitute consent to the terms contained herein on behalf of the Minor/Ward. The parent or legal guardian who signs this agreement on behalf of a minor, incapacitated and/or mentally challenged person (hereinafter, "Said Person"), hereby acknowledges that he or she had the legal capacity and authority to act on behalf of Said Person to legally bind Said Person to this agreement. The parent or legal guardian who signs this agreement agrees to indemnify and hold harmless the GUM and its agents for any expenses incurred, claims made, or liabilities assessed against GUM, as a result of any insufficiency or legal capacity or authority to act on behalf of Said Person in the execution of this agreement.

Read, Understood, and Agreed to by:

Signature of Parent/Guardian	Printed Name of Parent/Guardian	Date

GREENSBORO URBAN MINISTRY

PHOTO & VIDEO RELEASE

In consideration of the opportunity to have my application to participate in volunteer activities and/or utilize the placement services of Greensboro Urban Ministry (hereinafter, "GUM") reviewed, I hereby agree to the following:

1. I irrevocably consent to and authorize the unrestricted use by and their agents of any photographs, recordings, interviews, videotapes, motion pictures, or similar visual recordings of me when engaged in activities associated with my participation with GUM, without compensation or further notice, and I agree to assign all copyright or other interests therein to GUM.

2. I hereby waive any right that I may have to inspect and/or approve the finished product or the advertising copy that may be used in connection therewith, or the use to which it may be applied.

3. I further consent that my name and identity may be revealed therein or by descriptive text or commentary.

4. This agreement will be governed by and construed in the widest possible manner in accordance with the laws of the State of North Carolina. Any action relating to the subject matter of this agreement against GUM or its agents shall be brought in either the state or federal courts of North Carolina.

Read, Understood, and Agreed to by:

_____	_____	_____
Signature Volunteer	Printed Name of Volunteer	Date

_____	_____	_____	_____
Address	City	State	Zip Code

_____	_____	_____
Telephone	Mobile	E-mail Address

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Read, Understood, and Agreed to by:

_____	_____	_____
Signature of Parent/Guardian	Printed Name of Parent/Guardian	Date

Social Media and Blogging

Greensboro Urban Ministry (GUM) respects the right of volunteers to use social networking sites, personal websites, and other internet communication sites as a medium of self-expression. However, the agency expects volunteers to follow established guidelines concerning social media and blogging.

- If volunteers identify themselves as volunteers of GUM on personal blogs or internet communication sites, they must make it clear that the views expressed are the author's alone and do not represent the views of the agency.
- Volunteers may not post on personal blogs or other sites the name, trademark or logo of GUM or any business with a connection to GUM. Volunteers cannot post agency-privileged information or agency-issued documents.
- Volunteers may not use personal internet communication sites to disparage GUM, our clients, employees or vendors.
- Volunteers should have no expectation of privacy while using the internet. Postings can be reviewed by anyone, including GUM. GUM reserves the right to monitor comments or discussions about the agency, its employees and clients, posted on the internet by anyone, including volunteers.
- Volunteers may not use agency owned equipment, including computers, agency-licensed software or other electronic equipment, facilities, or agency time, to conduct personal blogging or social networking activities.
- Volunteers may not use blogs or social networking sites to harass, threaten, discriminate or disparage against volunteers, employees or anyone associated with GUM.
- Volunteers may not post on personal blogs or social networking sites photographs of other volunteers, employees, clients, vendors, or suppliers. Nor can volunteers post photographs of our clients, or persons engaged in agency business or at agency events without the expressed consent of the individuals or businesses involved. In the case of a minor, the consent needs to be that of the legal guardian.
- Volunteers may not link from a personal blog or social networking site to GUM's web site.

Volunteers found in violation of any portion of the social media and blogging policy will be subject to disciplinary action, up to and including termination of volunteer placement. GUM requests and strongly urges volunteers to report any violations or possible perceived violations to the Immediate Supervisor, Volunteer Services Department or Director of Programs.

Read, Understood, and Agreed to by:

Signature Volunteer	Printed Name of Volunteer	Date

Address	City	State	Zip Code

Telephone	Mobile	E-mail Address

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Read, Understood, and Agreed to by:

Signature of Parent/Guardian	Printed Name of Parent/Guardian	Date

NAME

PROGRAM AREA OF INTEREST

- ☐ **ADMINISTRATION**
- ☐ **EMERGENCY ASSISTANCE**
- ☐ **FOOD DRIVES**
- ☐ **FOOD PANTRY**
- ☐ **PARTNERSHIP VILLAGE APARTMENT COMMUNITY**
- ☐ **PATHWAYS FAMILY CENTER**
- ☐ **POTTER'S HOUSE COMMUNITY KITCHEN**
- ☐ **SPECIAL EVENTS**
- ☐ **STEPHEN MINISTRY**
- ☐ **WEAVER HOUSE SHELTER**

***Number in terms of preference**

VOLUNTEER AVAILABILITY