



Volunteer Application and Agreements

Personal Data – please print clearly and in ink.

Full Name (Last, First and Middle Initial): _____

Name of Parent or Guardian if under 18 years: _____

Current Address: _____

Best Contact Number: _____

Date of Birth: _____

Emergency Contact: _____

Do you have any friends/family members who are employed or volunteer here now or in the past? _____
Yes _____ No _____

How did you hear about ARCH? _____

When are you available to volunteer (specify hours of availability)?

Monday _____ Tuesday _____ Wednesday _____

Thursday _____ Friday _____ Saturday _____

Sunday _____ Holidays only _____

Circle which ARCH volunteer experience(s) are you interested in: *Welcome Home Angels, Newborn Angels, Baby Rockers, Life Skills Facilitators, Recovery Runners, Handy Helpers, Holiday Helpers, Event Volunteers*

List your past volunteer experiences:

Organization: _____ Month/Year to Month/Year: _____

Organization: _____ Month/Year to Month/Year: _____

Legal Background:

Have you ever been adjudged civilly or criminally liable for abuse of a child or an individual with disabilities?
_____ Yes _____ No If yes, please explain. _____

Volunteer Agreements

As a volunteer, I will not have any resident children in my care without a parent or employee of ARCH present.

As a volunteer, I agree to refrain from photography, videoing, or recording any resident of ARCH.

As a volunteer, I agree to keep my relationship with all ARCH clients professional and not see clients outside of ARCH appointments.

As a volunteer, I agree to keep the identity of the residents, any written, verbal or observed identifying information confidential.

Conduct yourself in an appropriate and ethical manner at all times when dealing with visitors', Board Members, and staff.

As a volunteer, I agree to abide by all applicable rules and regulations of the agency. I understand that I will receive no monetary benefits in return for my volunteer services and that ARCH may terminate this agreement at any time without prior notice for any reason.

I certify that my answers on this application are true and complete and that I have not knowingly withheld any information that might, if disclosed, affect my application unfavorably. I understand that any misrepresentation or omission of facts on this application could be cause for rejection of this application or dismissal.

I hereby Release and Waive liability against ARCH, a non-profit organization, its Directors, Officers, employees and agents, its successors and assigns, for any injuries or illness that I may suffer in connection with any volunteer work for ARCH. Further, I agree that ARCH is not liable for any damage to my property resulting from volunteer work for ARCH.

Both ARCH and volunteer agree that the relationship created by this Agreement is that of volunteer/non-profit organization and not that employee/employer and that it does not create any agency, partnership, joint venture, or franchise of other similar or special relationship between the parties. Volunteer shall not have the right or authority to assume or create any obligations or to make any representations, warranties or commitments on behalf of ARCH, whether expressed or implied, or to bind ARCH in any respect whatsoever.

As a volunteer, I agree to be responsible for any and all background check fees that may apply.

Have fun and agree to ask questions if needed. Remember we are here for you!

By my signature I declare that I have read, understand, and agree with all parts of the Volunteer Agreements and will strive to fulfill all parts herein.

Volunteer Signature

Date

Executive Director

Date