

CARL CHERRY CENTER FOR THE ARTS (CCCA) VOLUNTEER APPLICATION

APPLICANT INFORMATION

Name: (Last, First)

Email:

Address, City, State

Phone:

Cell:

Why are you interested in volunteering with the CCCA?

Have you volunteered before? Please detail your experience (organization, duties assigned, training received, length of time)

When are you able to volunteer? *(See list of volunteer opportunities and times needed on page 2)*
Please specify days of the week and times each day, or specify "Morning, Afternoon, or Evening".

What is your background in the arts? Please elaborate.

What are your hobbies or special interests?

EMPLOYMENT, EDUCATION, AND SKILLS

Are you currently employed? Yes () No ()

If yes, what is your job title? Primary duties?

Employer:

Duration of Employment:

Does your employer support/encourage employee volunteering? Yes () No ()

Are you currently in school? Yes () No ()

If yes, please provide your current school name & grade level. Please note that all volunteers must be at least 18 years of age.

If you have completed school, please provide the name of your last school and your highest completed grade level or Degree.

Do you speak any languages other than English? Yes () No ()
Please note language(s) and proficiency.

Which computer programs are you proficient in using?

POTENTIAL VOLUNTEER ASSIGNMENTS AND ASSOCIATED SCHEDULES

Please place a check in the box next to each volunteer assignment, with its typical schedule, that you wish to explore.

- HOSPITALITY: Art Exhibit Openings on Friday Evenings from 5pm – 7pm
Special Events on Saturday Evenings from 4:30pm – 9pm
- GALLERY DOCENT/GREETER: Saturday Mornings/Afternoons from 11am – 4pm
- TICKETING SUPPORT: Theater Event Ushers and as needed
- STAGE SETTING SUPPORT: As needed on Fridays and/or Saturdays for theater events
- OFFICE SUPPORT: Daily, or as needed
- GRANT WRITING SUPPORT: As needed
- BUILDINGS & GROUNDS SUPPORT: Garden Trim and Clean Up, or as needed
- TECHNICAL SUPPORT: As needed

The CCCA has the right to change, add or delete any potential volunteer assignment and/or associated schedules at any time for any reason, based upon the needs of the CCCA.

The above list of potential volunteer assignments and associated schedules represents estimated needs at the time of the drafting of this application and in no way guarantees any specific assignment or schedule for anyone applying to volunteer for the CCCA.

ADDITIONAL INFORMATION

Are you legally authorized to work in the United States? () Yes () No

Note: If you are selected for a volunteer position, you will be required to show proof of your age and legal right to work in the United States. Please note that all volunteers must be at least 18 years of age.

Have you ever been convicted of a misdemeanor or felony, been on parole or probation? () Yes () No

EMERGENCY CONTACT

Please provide the name of a friend or relative not residing with you who can be contacted in case of emergency.

Name:

Address:

Phone:

City:

State:

ZIP Code:

Relationship:

REFERENCES

Please provide the names of 3 non- family members of legal age who can provide references regarding your ability to perform this volunteer responsibility.

Name

Address

Phone

ASSUMPTION OF RISK AND WAIVER OF LIABILITY

In consideration for being allowed to participate at the Carl Cherry Center for the Arts (CCCA) as a volunteer, on behalf of himself or herself and all heirs, administrators, executors, and assigns, the undersigned agrees to the following Assumption of Risk and Waiver of Liability: In consideration of my involvement with the CCCA, I hereby release and agree to indemnify and hold harmless the CCCA, its board of directors, its employees and agents from any and all liability and negligence for any damage or injury which may occur regardless of the cause that may result from my participation as a volunteer for the CCCA. This release of liability and agreement given by me to the CCCA, its board of directors, its employees and agents shall apply to any claim, demand suit or right of action that may accrue to myself, my heirs and my personal representatives, including claims of negligence. Further, I agree to assume all risks in participation and am fully aware that personal danger may be involved in this activity.

MEDIA CONSENT

I consent to the unrestricted use of my image, in connection with the CCCA or any person authorized by the CCCA, including but not limited to, any photographs, audio or visual recordings, interviews, videotapes, motion pictures including the use of my name in connection with television, radio or print media.

TOOLS AND EQUIPMENT

In consideration for the CCCA making its tools and/or equipment available for my use at, or on behalf of, the Carl Cherry Center, I agree on behalf of myself and all of my heirs, administrators, executors, and assigns, to the following: I agree to indemnify the CCCA, its Board of Directors, its employees, agents, officials, and officers from all liability, including claims or actions for physical injury, death or property damage arising out of or in connection with the borrowed tool(s) and equipment, including those claims based on product liability or negligence. I agree to waive any and all claims that I may have against the CCCA, its employees, agents, officials and officers from any liability, including claims or actions for physical injury, death, or property damage I experience arising out of or in connection with the borrowed tool(s) and equipment, including those claims based upon product liability or negligence. I agree to waive any and all claims that I may have against the CCCA, its employees, agents, official and officers for any physical injury, death or property damage I experience arising out of the use of the borrowed tool(s) and equipment. I understand that by signing this Waiver I am giving up my right to sue the CCCA for any damages resulting from the use of the tools and equipment. I acknowledge that I have received, read and understood the operating instructions for any borrowed power tool or equipment. I acknowledge that the power tool(s) must NOT be used by any person under the age of eighteen (18) years old. I acknowledge that the CCCA as provided the tools and/or equipment to me at no cost as a public service. It is my responsibility to inspect and check the equipment prior to use and to stop using the tools and/or equipment if I have any indication whatsoever that it might be unsafe. I agreed to notify the CCCA of any problems encountered when using the tools or equipment.

PARTICIPANTS

I understand that I have voluntarily agreed to assist the CCCA, that I will not be paid for my services, and that either the CCCA or I may terminate my participation at any time for any reason. I, the undersigned, have read all of the items above and fully understand its contents, and I am aware that this is a release of certain rights and sign it of my own free will. I am 18 years of age or older.

SIGNATURE:	PRINT YOUR NAME:	DATE:
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CERTIFICATE OF APPLICANT

I certify that the information I have provided above is true, complete and correct to the best of my knowledge. I have not knowingly withheld any fact or circumstance that would, if disclosed, subject me to disqualification or dismissal. I understand any or all information on this application is subject to verification by the Carl Cherry Center for the Arts. By signing below, I authorize you to communicate the verification of the information provided on this form. I have received a copy of this application.

Signature:	Date:
Print Your Name	