

## **Volunteer Registration & Information Form**

Name:							
	Telephone (H): (C):						
E-mail:							
Birthday Month:	Day:						
Allergies/Medical Concerns:							
Emergency Contact:	Relationship:						
Telephone Number (H):	(C):						
Is this request for Court Ordered Community Service Hours? Yes $\square$ No $\square$							
Is this a request for School Mandated Student Hours? Yes  No  Length of Volunteer Commitment: Less than 6 months  More than 6 months  Education/ Professional Background:							
						Interests/ Skills:	
						Previous volunteer experience:	
How did you hear about our pro	ogram?						
What prompted you to choose The Salvation Army for your volunteer service?							
**Please note all information co	ollected is kept confidential and is for the records at Grace						

Aı	reas of interest for vo	€ `	11 0/				
		e/ Clerical type duties					
	Giving manicures						
	Help feeding resident	s (training program is	provided)				
	Serving and clearing	tables in the dining ro	om				
	Delivering mail to residents						
	Going for walks with	a resident indoors an	d outdoors				
	Providing companion	nship visits					
	Reading to a resident						
	Assist hairdresser						
	Help recreation staff	with resident group pr	rograms				
	Light sewing/ mending	ng					
	Singing or playing a	musical instrument					
	Playing cards/ board	games					
	Bringing a pet into to	visit					
	Bringing in an infant/	toddler to visit					
	Outdoor Gardening/I	ndoor House Plants					
Av	ailability:						
	vailability:	MORNINGS	AFTERNOONS	EVENINGS			
L N	OAY Monday	MORNINGS	AFTERNOONS	EVENINGS			
Γ N T	DAY Monday Yuesday	MORNINGS	AFTERNOONS	EVENINGS			
N T V	OAY Monday Tuesday Vednesday	MORNINGS	AFTERNOONS	EVENINGS			
T V T	OAY Monday Tuesday Vednesday Thursday	MORNINGS	AFTERNOONS	EVENINGS			
T V T F	OAY Monday Tuesday Vednesday	MORNINGS	AFTERNOONS	EVENINGS			
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If accepted as a Salvation Army volunteer, I agree to the following:

- To participate in designated training sessions when provided, to help me in my volunteer assignment.
- To inform my supervisor if I am not able to meet my commitment, I understand that others depend on me.
- To wear required identification when on duty as necessary.
- To wear modest and appropriate clothing for the performance of my duty and position
- I understand that I am responsible for all of my personal belongings I bring to the site.
- To maintain strict confidentiality.
- To provide my time and service without remuneration.
- To adhere to the smoke and/or alcohol-free environment.
- To immediately report all injuries, accidents, or other incidents to my supervisor
- As a Volunteer, I have no right or authority to represent The Salvation Army as an official spokesperson, or to make any contract or binding promise of any nature on behalf of the Organization
- To give The Salvation Army permission to contact the above named references.
- To provide a current vulnerable sector police check and give permission for the Salvation Army to view the results from this police check
- To consent to Salvation Army policies on zero tolerance for abuse, the code of conduct and waiver of liability

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equivalent of my manual/handwritten signature on this document. I am also confirming that I am authorized to enter into this Agreement. If I am signing this document on behalf of a minor, I represent and warrant that I am the minor's parent or legal guardian.

## Parent/Guardian, please be aware;

- There may be times youth volunteers will be unsupervised during their volunteer assignment.
- Teen volunteer may only be involved in supervised programs with the residents and may only complete independent duties as assigned by the Volunteer Coordinator or Director or Director of Life Enrichment

Signature of Volunteer Coordinator	Date