

50 NORTH VOLUNTEER APPLICATION (please print clearly)

Name _____ Date _____ Address _____

City _____ State _____ Zip _____ Telephone _____

Alternate _____ Email _____

Date of Birth _____

Why are you interested in volunteering at 50North? _____

Check areas of volunteer interest:

- | | | |
|--|---|---|
| <input type="checkbox"/> Activities/Special Events | <input type="checkbox"/> Ambassador | <input type="checkbox"/> Book Corner/Library |
| <input type="checkbox"/> Blood Pressure Monitoring | <input type="checkbox"/> Bread Pick-Up | <input type="checkbox"/> Dining Room Assistant |
| <input type="checkbox"/> Chores/Special Projects | <input type="checkbox"/> Garden Host | <input type="checkbox"/> Guardianship Program |
| <input type="checkbox"/> Grocery Delivery | <input type="checkbox"/> Grocery Order | <input type="checkbox"/> Group Projects |
| <input type="checkbox"/> Mobile Meal Delivery | <input type="checkbox"/> Mobile Meal Packer | <input type="checkbox"/> Respite |
| <input type="checkbox"/> Check-In (Safety) | <input type="checkbox"/> Santa For Seniors | <input type="checkbox"/> Fitness (Exercise Buddy) |
| <input type="checkbox"/> Baking Assistant | <input type="checkbox"/> Cafe Server | |
| <input type="checkbox"/> Navigator Delivery | <input type="checkbox"/> Silverware | <input type="checkbox"/> Other |

If you are interested in teaching or assisting in a class, please check:

- Fine Arts Crafts Hobbies Photography Writing Legal Music
 Nutrition History Language/Culture Technology Health Travel Theater/Drama
 Dance Spiritual Finance/Investment Safety Cuisine/Wine/Beer Cards/Games
 Other: _____

Current Position:

Employed Full-Time _____ Employed Part-Time _____ Student _____ Retired _____

Ohio Driver's License? _____ Reliable Transportation _____ Auto Liability Insurance? _____

References (non-family):

Name _____ Telephone _____

Name _____ Telephone _____

Emergency Contact:

Name _____ Relation _____ Telephone _____

Address _____

RELEASE OF INFORMATION:

I, _____, hereby grant 50 North permission to contact references and to complete a law enforcement agency and a Bureau of Motor Vehicles background check as part of the volunteer selection process.

Signature _____ Date _____

AGREEMENT TO PARTICIPATE:

I, _____, wish to participate as a volunteer sponsored by 50 North. I understand there are risks inherent in any physical activity. I assume that risks and accept the consequences involved in my participation in the volunteer opportunity which I have signed up for. I understand that if I am injured, I am responsible for my health care costs and I agree to release 50 North, its Board of Trustees, officers, employees, or volunteers from any and all claims for injury or illness resulting from my participation.

Signature _____ Date _____

PHOTOGRAPHY RELEASE:

I, _____, hereby grant 50 North an irrevocable license to use my likeness now or at any time in the future, in any manner it so chooses and in any medium now existing or later developed. This includes, without limitation, use on 50 North brochures, newsletters and any other promotional material it wishes. I acknowledge that 50 North is under no obligation to use my likeness. I agree that there are to be no fees, commissions or royalties paid to me for the use of my likeness.

Signature _____ Date _____

ACKNOWLEDGEMENT OF VOLUNTEER STATUS

I, _____, understand and agree that I am a volunteer for 50 North and not an employee. I volunteer my time and services to 50 North without promise or expectation of any type of compensation or personal financial gain. The activities that I engage in on behalf of 50 North, its members and its community are done solely for my personal purpose or pleasure.

Signature _____ Date _____