

Volunteer Application

Name		Telephone #	<input type="checkbox"/> Male <input type="checkbox"/> Female
Mailing Address/City/State/Zip		Email Address	
Physical Condition <input type="checkbox"/> Excellent <input type="checkbox"/> Good <input type="checkbox"/> Fair <input type="checkbox"/> Poor		Please Explain Any Physical/Medical Limitations	
Willing to Serve <input type="checkbox"/> Mornings <input type="checkbox"/> Afternoons <input type="checkbox"/> Evenings <input type="checkbox"/> Saturdays <input type="checkbox"/> Sundays			
Volunteer Experience			
Volunteer opportunities I am interested in (check all that apply):			
<input type="checkbox"/> Education program support		<input type="checkbox"/> Event Support:	
<input type="checkbox"/> Fundraising		<input type="checkbox"/> Planning <input type="checkbox"/> Games/activities	
<input type="checkbox"/> General office duties (data entry, mailings, etc.)		<input type="checkbox"/> Greeter <input type="checkbox"/> Food service	
<input type="checkbox"/> Maintenance and repairs		<input type="checkbox"/> Set up/clean up	
<input type="checkbox"/> Other: _____			
Why do you wish to serve your community as a volunteer?			
Do you have a car? <input type="checkbox"/> Yes <input type="checkbox"/> No		Special Interests / Language/ Hobbies	
Do you have any criminal convictions (other than parking violations and/or juvenile offenses)? If YES, please describe (dates, locations)			
Medical / Health Information			
Allergies or special medical conditions that we should know about			
Please Provide Emergency Contact Information			
Name		Relationship	
Telephone		Alt. Telephone	

Responsibilities

- All volunteers need to fill out and sign a Volunteer Application. Volunteers between the ages 15 to 18 must have a parent or guardian sign the Volunteer Application.
- Volunteers authorize TFT to take photos of them and use them for marketing and advertising purposes.
- The safety of our volunteers is important. Volunteers who are injured or who are involved in an accident during their volunteer assignment must report their injury or accident immediately to either the Executive Director or Operations Manager. Any on the job injuries are not covered by TFT Worker's Compensation insurance.
- Volunteers are representatives of TFT and should conduct themselves according to our already established policies. They are expected to dress appropriately for the duties to which they are assigned. They are responsible for maintaining confidentiality of privileged information to which they may be exposed while serving as a volunteer.
- Volunteers will be given training for the tasks they are assigned to do.
- Volunteers are considered partners in our mission and should understand and respect the needs and abilities of others.
- Volunteers are expected to let us know in advance if they will not be able to come for times assigned.

Volunteer Policy

Purpose

This policy is designed to enable Trees For Tomorrow (TFT) to accept volunteers, reduce volunteer risk and protect the interests of TFT, its volunteers and the communities it serves. It is to provide overall guidance and direction to our volunteers. These policies do not constitute, either implicitly or explicitly, and binding contractual or personnel agreement.

Description

TFT volunteers are uncompensated individuals who perform services directly related to our business. A volunteer is anyone who chooses to perform services to TFT without compensation, and who performs a task as the direction of and on behalf of TFT. Travel costs associated with the use of personal automobiles to and from volunteer work stations or for volunteer assignments, will not be reimbursed. Volunteers are not employees of TFT but represent a valuable resource to us. They should actively perform their duties to the best of their abilities and remain loyal to our mission.

Anyone may volunteer services to TFT that is at least 15 years of age.

Prior to being assigned duties, a volunteer will be interviewed to ascertain their suitability and interest in the assignment. A reference check and or criminal check may be made, if appropriate. Volunteers will follow supervision and direction and participate in any training required to perform voluntary service.

The Wisconsin Worker's Compensation Act does not provide for worker's compensation coverage for volunteers, including volunteers of non-profit organizations that receive money or other things of value totaling not more than \$10.00 per week. Volunteers cannot be covered under a worker's compensation policy and cannot collect worker's compensation benefits if they incur an injury or illness during the course of their voluntary service. The worker's compensation law has no jurisdiction over any other form of relief that may be available to a volunteer.

Statement of Understanding

I certify that the information furnished on the Volunteer Application is correct and I understand that falsification of information may result in my termination as a volunteer. I understand Trees For Tomorrow (TFT) may arrange a criminal history background check, if necessary. I have read and understand the Volunteer Policy on this form. I hereby acknowledge that I have agreed to volunteer at or for TFT in Eagle River, Wisconsin, and I understand that if I am injured, either myself or my own insurance must cover the cost of treatment since I am not an employee and will not be covered by TFT's worker's compensation or health care policies. I further understand my services are a donation and I expect no wages, compensation, or other benefits for my services (If volunteer is age 15-18 a parent or guardian needs to sign this request).

Confidentiality Agreement

I agree at all times during my time with Trees For Tomorrow and thereafter, to hold in strictest confidence, and not to use, except for the benefit of Trees For Tomorrow, or to disclose to any person, organization, or other entity without written authorization from the officers of Trees For Tomorrow, any Confidential Information which I obtain or create. I further agree not to make copies of such Confidential Information except as authorized by Trees For Tomorrow.

I understand that "Confidential Information" means any Trees For Tomorrow financial information, accounts receivables, accounts payables, fundraising information, incident details, membership information, payroll information, personnel information, curriculum (unless prior approval given by Operations Manager and/or Executive Director), school/group rosters, school/group health forms, workshop files, and other proprietary information.

I understand that violating the Confidentiality Agreement will result in my removal of further volunteer and employment opportunities with Trees For Tomorrow.

By signing below, I agree to the following:

- I have read the above Responsibilities, Confidentiality Agreement & Statement of Understanding & agree to abide by them.
- I agree to hold harmless and indemnify Trees For Tomorrow, their officers, employees, and agents from any and all liability, loss, damages, costs, or expenses which are sustained, incurred, or required arising out of the actions of my volunteer time for Trees For Tomorrow.

Volunteer Applicant Signature	Date Signed
Parent Signature (if volunteer is under age 18)	Date Signed
Operations Manager Signature	Date Signed
	Approved <input type="checkbox"/> Yes <input type="checkbox"/> No