

The Haywood-Jackson Volunteer Center



2143 Asheville Road Waynesville, NC 28786

Phone: 828-456-6456 Fax: 828-456-9187

Today's Date

**PLEASE SAVE THIS DOCUMENT TO YOUR COMPUTER AND
THEN EMAIL TO jchicoine@mountainprojects.org**

Name:	Do you drive?
Mailing Address:	License No.:
City, ST Zip:	Expiration Date:
Phone:	Physical Limits?
Race:	List talents, hobbies to share:
Email:	Previous work experience:
Birth Date:	Personal Reference
Gender:	Name:
Education:	Phone:
Emergency contact:	Relationship:
Phones:	
Relationship:	

I understand that all information on this form is voluntarily supplied and may be used and disclosed for volunteer purposes only. I also agree to release and hold harmless the staff, staff volunteers, and board of directors of the Volunteer Center and Mountain Projects Inc., from any and all liability for disclosing this information to agencies and their agents who request volunteer assistance or for any injury incurred while on volunteer assignment. I hereby volunteer my services and understand that I am not a paid employee of any agency or group to which I may accept assignment, nor am I an employee of the Volunteer Center or Mountain Projects, Inc.

By becoming a volunteer, I understand that I will have the opportunity to participate in many individual and group volunteer projects. By signing this application, I (parent/guardian, if applicant is under 18) grant permission for participation in events without requiring additional permission forms. I also grant the Haywood County Volunteer Center permission to use photographs taken of member at volunteer activities for publication to promote volunteerism.

Representatives of Mountain Projects, Inc., participating agencies, and / or other funding sources may review this application.

Applicant Signature

Date

Parent/guardian signature

Date