



STUDENT VOLUNTEER APPLICATION

PLEASE TYPE OR PRINT LEGIBLY

PART A - To be completed by student

Name: _____

Address: _____

Phone: _____ Usual method of transportation: _____

Email: _____

School: _____ Grade: _____

Emergency Contact: _____ Phone: _____

Student Pledge: *I agree to fulfill the duties and time commitments including training sessions and to provide adequate notice if I am unable to meet my commitments. I also agree to abide by the organization's policies and procedures.*

Student Signature: _____ Date: _____

PART B - To be completed by parent/guardian

I, (print name) _____, give permission for the above-named student to serve as a volunteer for your organization.

I understand that they will be making a valuable and needed contribution to our community. I also understand that they will not receive monetary compensation for their services.

We have accident insurance with _____ (name of insurance company) which will cover my child/ward in the event of injury while engaging in this activity. I will assume responsibility for expenses incurred as the result of any injury my child/ward might suffer while participating in this activity. If a change occurs in the policy, it is my responsibility to notify you immediately.

Parent/Guardian Signature: _____

Date: _____ Email: _____