



Youth Volunteer Application

Personal Information

Name		School Name		Today's Date
Address		City	State	Zip
Your Age	Your Home Phone	Your Cell Phone	Your E-mail	
Parents Name (please list both parents if possible)		Parents Work Number (please list both if possible)	Parents Cell Phone (please list both if possible)	

Emergency Contact (If someone other than your Parent)

Name	Phone Number	Relationship
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Volunteer Preferences and Experience

Have you ever volunteered at an organization? <input type="checkbox"/> yes <input type="checkbox"/> no If yes, where? If you have volunteered at Cheekwood, what project or event were you involved with?	Name of the group you are volunteering with: (If volunteering as an individual, leave this section blank)
Volunteer Positions/Events you are interested in: <input type="checkbox"/> Summer Camp *Must complete Summer Camp Application instead <input type="checkbox"/> Art Activities Assistant (Saturday AM/Tuesdays for Tots) <input type="checkbox"/> Admin <input type="checkbox"/> Booth Assistant <input type="checkbox"/> Welcome Center <input type="checkbox"/> Garden Volunteer <input type="checkbox"/> Special Events <input type="checkbox"/> Special Projects	List any hobbies, skills or interests that you would like to share at Cheekwood:

Availability (Please check all that apply)

Tuesdays

Morning
 Afternoon
 Evening

Wednesdays

Morning
 Afternoon
 Evening

Thursdays

Morning
 Afternoon
 Evening

Fridays

Morning
 Afternoon
 Evening

Saturdays

Morning
 Afternoon
 Evening

Sundays

Morning
 Afternoon
 Evening

*Cheekwood is closed on Monday

Available starting: _____ Available until: _____ (If your end date is open, please leave blank)

(continued on next page)

References: List three people not related to you, whom you have known at least one year.

Name	Home & Cell Phone	Relationship	Years Known

<p>AUTHORIZATION: Please sign if you have read and understand the following:</p> <p>All the information I have included is correct and may be verified by Cheekwood. If I become a Cheekwood volunteer and later it is found that the information I have given is significantly untrue, incomplete, or misrepresented, I understand and agree that Cheekwood is relieved of all commitments, and that I may no longer volunteer for Cheekwood.</p>	<p>RELEASE:</p> <p>I give permission for each person listed above to provide any information they have regarding my character, ability, job performance, and volunteer experience. I will hold these people and Cheekwood harmless for doing so.</p>
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Applicant Signature	Date
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Parental Permission

Must be signed by your parent before you are authorized to volunteer at Cheekwood.

Authorization & Release: Please review and sign where indicated.

I give permission for my son/daughter to volunteer at Cheekwood. I understand that my child should be picked up promptly (if necessary) when his/her volunteer time is over and that s/he will be expected to dress appropriately for work in a public place.
I have read and understand the above authorization and disclosure that my child has signed and agree to the conditions.

Parents Signature	Date
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Please fax, email, or mail *completed* form to: Cheekwood Volunteer Department 1200 Forrest Park Drive, Nashville, TN 37205
Phone—615.353.6966 Fax—615.353.2731 volunteers@cheekwood.org

It is the policy of Cheekwood to consider applications for all positions without regard to any protected characteristic.