

Oakwood Trails Neighborhood Watch (WIW/OTNHW)

GET ACTIVE, GET INVOLVED!

VOLUNTEER Sign up Form

Personal Information

Name: _____ Home Phone: _____
 Address: _____ Work Phone: _____
 Cell Phone: _____ E-mail Address: _____
 Emergency Contact Name: _____ Emergency Contact Home Phone: _____
 Relationship: _____ Emergency Contact Cell Phone: _____

For demographic data only:

Age: _____ Marital Status: _____
 Sex: _____ Race/Ethnicity: _____

Volunteer Opportunities

Please place an "X" by your area of interest

<input type="checkbox"/>	Annual Back to School Block Party	<input type="checkbox"/>	Community Outreach
<input type="checkbox"/>	Collaboration and Partnership Development	<input type="checkbox"/>	Marketing, Communication & Social Networks
<input type="checkbox"/>	Sponsor and Donor Development	<input type="checkbox"/>	General Volunteer Opportunities

Please place an "X" in the box of the days and time you can volunteer:

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Morning							
Afternoon							
Evening							

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Education, Employment, Special Skills and Community Service/Volunteer Experience

Highest Degree: _____

Major: _____

School/College/University: _____

Are you currently
↓ a student?

Present/Last Employee: _____

If yes, where? _____

Position: _____

Type of Work
Experiences: _____

Special Skills: _____

Community
Service/Volunteer
Experience: _____

Signature(s) _____

I have agreed to participate as a WIW/OTNHW volunteer and understand that I will not be paid for my services and will not be covered by workers' compensation as a result of any tasks/activities associated with volunteer service.

As a participant as a volunteer, I release the WIW/OTNHW from all liability of any kind whatsoever including, but not limited to claims, demands, actions or causes which may arise out of my participation and waive all rights which I may have against WIW/OTNHW members, representatives, vendors, exhibitors, sponsors, and/or other volunteers during the planning and execution of the event.

I understand that my attendance and involvement as a volunteer is strictly voluntary and that I am participating at my own risk.

I have read and agree to the foregoing terms and conditions of this Volunteer Release Agreement.

Signature _____ Date _____

If you are under the age of 18, please have a parent or guardian sign the following:

I am the parent or guardian of _____ and have read and agree to his/her participating in the volunteer activities pursuant to the foregoing terms and conditions of this Volunteer Release Agreement.

Signature of parent or guardian _____ Date _____ **Please note all information collected is for program purposes only and will be kept confidential**