

<u>City of Waynesville</u>

Roubidoux DO IT Crew

Waynesville, MO. 65583 Phone: (573) 774-6171 Fax: (573) 774-5467

100 Tremont Center

Volunteer Registration

Please inform us if you require assistance in filling out an application. Individuals with disabilities should request reasonable accommodations in accordance with the Americans with Disabilities Act prior to an appointment.

REGISTRATION FOR CREW MEMBER STATUS

The City of Waynesville has a long tradition of working closely with the community to improve and expand upon the City's quality of life. To that end, it is the volunteer that offers their time, knowledge and commitment that ensures the City is able to prepare for the future of not only it's citizens, but the region as a whole.

Please fill out the application, in its entirety.

PERSONAL INFORMATION

| | RSUNAL INFURMATION | | | | | | | | |
|---|------------------------------------|-------------|---------------------|---|----------|---------------|----------|-----------------------|--|
| Na | me: (Last, First, Middle Initial) | | | | | | Drive | r's License No/State: | |
| Ad | dress: | | City/State/Zip Code | | | | de | | |
| Cel | I Phone: | Email: | | | | | | | |
| Are you over the age of 16? Yes No If no, you mus guardian at al | | | | ust be accompanied by a parent or all times. | | | | | |
| EM | IERGENCY CONTACT INFORM | | | | | | | | |
| | me: | | Relationship | | | | Phone: | | |
| AP | PLICANT BACKGROUND | | Γ | | | | | | |
| Occupation: Highe | | | | ghest Level of Education: | | | | | |
| Ple | ase list any organizations that ye | ou are curr | ently vo | olunte | eering f | or or you hav | /e helpe | ed in the past. | |
| | Organization | | | | Title | | Ler | Length of Service | |
| 1 | | | | | | | | | |
| 2 | | | | | | | | | |
| 3 | | | | | | | | | |
| Briefly explain your experience volunteering, especially in outdoor environments: | | | | | | | | | |
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Please attach additional pages or resumé if needed.

PERSONAL STATEMENT(S)

| In your own words | nlesse describe why | v vou are interested in | becoming a Roubidou | x DO IT Crew member: |
|-------------------|------------------------|-------------------------|---------------------|--------------------------|
| in your own worus | , please describe with | y you are interested in | becoming a Roubidou | X DO IT CIEW IIIeIIIDEI. |

Explain how your past experience will benefit the Crew:

List any other special skills or training you may have that you believe would benefit the Crew:

| What size shirt do you wear? | Small | Medium | Large | XL | 2X | 3X | Other |
|------------------------------|-------|--------|-------|----|----|----|-------|

| REFERENCES | | | | | | | |
|---|------------|-------------|--|--|--|--|--|
| <i>Please list the names of three persons, who are not related to you that we may contact for a personal reference.</i> | | | | | | | |
| Name & Address | Cell Phone | Years Known | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| CERTIFICATION OF APPLICANT – Initial each statement (if applicable) | | | | | | | |
| General Certification | | | | | | | |
| I certify that all information I have provided is true, complete and correct. I expressly authorize, without reservation, the City of Waynesville, its representatives, employees or agents to contact and obtain information from all references (personal and professional), to otherwise verify the accuracy of all information provided by me in this application and/or interview. | | | | | | | |
| 2. I hereby waive any and all rights and claims I may have regarding the City, its agents, employees or representatives, for seeking, gathering and using truthful non-defamatory information, in a lawful manner, in the application process and all other persons, corporations or organizations for furnishing such information about me. | | | | | | | |
| 3. I understand that the City does not unlawfully discriminate and no question on this application is used for the purpose of limiting or eliminating any applicant from consideration for service on any basis prohibited by applicable, local, state or federal law. | | | | | | | |
| 4. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that I will serve the City on a volunteer basis only and may only be compensated for expenses incurred by me, in accordance with City policy and procedure. | | | | | | | |
| 5. I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient cause to (i) eliminate me from further consideration for service, or (ii) may result in my immediate removal from the Board or Committee I serve on, whenever it is discovered. | | | | | | | |
| 6. By signing, you agree that you are volunteering or providing community service on your own behalf and release the City of Waynesville, its officers, employees, and agents from any and all claims, injuries, or actions (including those of active or passive negligence) arising from any activities in which you participate for the City of Waynesville). | | | | | | | |
| Applicant's Signature: | Date: | | | | | | |
| Applicant's Printed Name: | | | | | | | |
| OFFICE USE ONLY | | | | | | | |
| Received by: Reviewing Official: | | | | | | | |
| Recommendation Approved: 🗌 Yes 🗌 No If no, explain why: | | | | | | | |
| Authorized Signature: Date: | | | | | | | |

CITY OF WAYNESVILLE Roubidoux DO IT Crew

RELEASE OF LIABILITY PLEASE READ CAREFULLY

I, ______, for myself, my heirs, and my personal representatives hereby assume all risk of personal injury or death from whatever causes arising, while I am participating in clean-up activities, which may be dangerous and risky, and release the City of Waynesville, its officers, agents, lessees, invitees and employees from any liability therefore, directly or indirectly, and will defend, indemnify and save harmless the City, its officers agents, lessees, invitees and employees from any such liability, whether or not arising out of negligent or willful actions or the failure to act, including the City's own negligence. The consideration for my agreements herein is my being allowed to engage in the activity identified above. (Further, I certify that I am over 18 years of age.)

Dated this ______, 20___.

Signature

Witness

If participant is under the age of 18 years, the following section must be completed.

I,______, being a parent or legal guardian of ______, a child, for myself, my heirs and my personal representatives, hereby agree to defend, indemnify, and save harmless the City of Waynesville, its officers, agents, lessees, invitees, and employees, from any action brought by or on behalf of the above-named child arising out of the activity identified above, which I understand may be dangerous and risky, including the City's own negligence. The consideration for my agreements herein is the City allowing said child to engage in such activity.

Dated this ______, 20___.

Signature

Revised April, 2013