



Volunteer Application
 RiverWorks Community Development
 P.O. Box 213 – Rockford, MN 55373
 763-477-5480
 like us” on Facebook
 www.riverworksonline.org



Please complete this application **for all RiverWorks volunteer** opportunities.

Please indicate below your area of interest in volunteering.

Date: _____

Name: _____

Address: _____ City _____ Zip _____

Phone: (H) _____ (C) _____ (W) _____

E-mail: _____

How did you hear about volunteering for RiverWorks? _____

Emergency Contact _____ Phone _____

I am over 18 years of age: ___ Yes ___ No If no, your age _____

If under 14 a parent/adult will need to serve with you.

Birthday Month / Day _____

I am interested in volunteering for:

___ The Food Shelf ___ The RiverWorks Store ___ Lunch Box Express (LBX)

For Food Shelf and Thrift Store, circle the days you are available:

___ Mon. ___ Tues. ___ Wed. ___ Thurs. ___ Fri. ___ Sat.

Food Shelf Hours

Thrift Store Hours

Monday 3:30 - 7:30 p.m.

Tuesday - Friday 10:00 a.m. to 6:00 p.m.

Tuesday 9:30 - 11:30 a.m.

Saturday - 10:00 a.m. - 4:00 p.m.

I can be called on short notice to fill in for a volunteer and serve as a sub. ___ Yes ___ No

Do you have any physical limitations that you wish us to know? ___ Yes ___ No

*Thank you for your interest in volunteering! We will contact you with dates and times you may begin volunteering.
 Welcome to our team of dedicated volunteers.*

OFFICE USE ONLY _____

Start Date _____ Pantry Saver (FS) _____ Constant Contact Entry _____ Mailing List _____

Referred by _____ Notes _____

Thank you for volunteering for RiverWorks Community Development. In an effort to make sure all volunteers are in agreement and that all parties have an understanding of trust, RiverWorks is asking you to agree to the following statements.

I am volunteering solely for personal purposes or benefit without promise or expectation of compensation, benefits or future employment from RiverWorks.

I hereby state and affirm that:

1. In consideration of being allowed to take part in this Activity, I agree to release and hold harmless RiverWorks, its officers, employees and agents, from all liability from any harm or injury that I may incur as a result of participating in the Activity.
2. I authorize RiverWorks staff to assist me by obtaining appropriate emergency medical treatment for me in the event of an accident, injury or illness.
3. I hereby release and forever hold harmless RiverWorks, its officers, employees or agents from any claims whatsoever which arise or may hereafter arise on account of any first aid, treatment or service rendered in connection with participation in the Activity.
4. I understand that any volunteer activity includes inherent risks, hazards and dangers that can cause or lead to injury. Some, but not all of these risks include: falls, slips, cuts and bruises. I understand that RiverWorks cannot eliminate any of these risks.
5. I understand that RiverWorks does not carry medical insurance for volunteers, and I attest to having appropriate medical insurance to protect me in the event of an accident, injury or illness.
6. Unless I indicate otherwise in writing, photographs, videotapes, or audiotapes may be taken of me during the course of the Activity for use by RiverWorks for publicity purposes. My first name is the only personal information about me that could be released by RiverWorks in use of the above mentioned media.
7. At times I may be privy to information that will need to be kept confidential regarding clients, donors, staff or thrift store products. I will treat all people with respect.
8. Finally I understand that RiverWorks or I may end my volunteer services at any time.

RiverWorks values...

People	We treat individuals as being worthy of our love, respect, and care.
Service	We believe that people benefit from serving and being served.
Relationships	We connect individuals and groups to create purposeful partnerships.
God	We exist to accomplish God's purposes.

My signature below affirms that all information on this form is accurate to the best of my knowledge and I agree to abide by the condition outlined above.

Volunteer Signature

Date
