

# The Haven Home Volunteer Application

*(This is a confidential document to be used for evaluating candidates for volunteering at The Haven Home.)*

FIRST NAME	MIDDLE	LAST	DATE
STREET ADDRESS		CITY / ZIP	
EMAIL ADDRESS			
HOMES/ CELL PHONE NUMBER		ALTERNATE PHONE	
<b>WHY ARE YOU INTERESTED IN VOLUNTEERING AT THE HAVEN?</b>			
_____			
_____			
_____			
<b>EMERGENCY CONTACT PERSONS</b>			
Name: _____		Phone Number _____	
Name: _____		Phone Number _____	
Please check the skills that you have professional experience with.			
<input type="checkbox"/> Project Management	<input type="checkbox"/> Website Design	<input type="checkbox"/> Social Media	<input type="checkbox"/> Graphic Design
<input type="checkbox"/> Program Development	<input type="checkbox"/> Human Resources	<input type="checkbox"/> Non Profit Management	<input type="checkbox"/> Financial Management
<input type="checkbox"/> Event Coordination	<input type="checkbox"/> Fundraising	<input type="checkbox"/> Strategic Planning	<input type="checkbox"/> Public Policy
<input type="checkbox"/> Chemical Dependency	<input type="checkbox"/> Social Work	<input type="checkbox"/> Social/ Human Services	<input type="checkbox"/> Group Facilitation
			<input type="checkbox"/> Marketing
			<input type="checkbox"/> Accounting
			<input type="checkbox"/> Grant Writing
			<input type="checkbox"/> Volunteering/ Interning
Volunteer Applicant Signature _____		Date _____	
Viewed By _____		Date _____	

\*\*Application is not complete until Volunteer Liability Waiver is read and signed by the applicant.

## Volunteer Release and Waiver of Liability Form

This Release and Waiver of Liability executed on \_\_\_\_\_ (date) by \_\_\_\_\_ (“Volunteer Name) releases THE HAVEN HOME a nonprofit corporation organized and existing under the laws of the State of Ohio and each of its directors, officers, employees, and agents. The Volunteer desires to provide volunteer services for Nonprofit and engage in activities related to serving as a volunteer. Volunteer understands that the scope of the Volunteer’s relationship with Nonprofit is limited to a volunteer position and that no compensation is expected in return for services provided by Volunteer; that Nonprofit will not provide any benefits traditionally associated with employment to Volunteer; and that Volunteer is responsible for his/her own insurance coverage in the event of personal injury or illness as a result of Volunteer’s services to Nonprofit.

Waiver and Release: I, \_\_\_\_\_, release and forever discharge and hold harmless THE HAVEN and its successors and assigns from any and all liability, claims, and demands of whatever kind of nature, either in law or in equity, which arise or may hereafter arise from the services I provide to Nonprofit. I understand and acknowledge that this Release discharges THE HAVEN HOME from any liability or claim that I may have against THE HAVEN HOME with respect to bodily injury, personal injury, illness, death, or property damage that may result from the services I provide to Nonprofit or occurring while I am providing volunteer services.

1. Insurance: Further I understand that THE HAVEN HOME does not assume any responsibility for or obligation to provide me with financial or other assistance, including but not limited to medical, health, or disability benefits or insurance. I expressly waive any such claim for compensation or liability on the part of Nonprofit beyond what may be offered freely by Nonprofit in the event of injury or medical expenses incurred by me.
2. Medical Treatment: I hereby Release and forever discharge THE HAVEN HOME from any claim whatsoever which arises or may hereafter arise on account of any first-aid treatment or other medical services rendered in connection with an emergency during my tenure as a volunteer with Nonprofit.
3. Assumption of Risk: I understand that the services I provide to THE HAVEN HOME may include activities that may be hazardous to me involving inherently dangerous activities. As a volunteer, I hereby expressly assume risk of injury or harm from these activities and Release THE HAVEN from all liability.
4. Photographic Release: I grant and convey to THE HAVEN HOME all right, title, and interests in any and all photographs, images, video, or audio recordings of me or my likeness or voice made by THE HAVEN in connection with my providing volunteer services to THE HAVEN HOME.
5. Other: As a volunteer, I expressly agree that this Release is intended to be as broad and inclusive as permitted by the laws of the State of Ohio and that this Release shall be governed by and interpreted in accordance with the laws of the State of Ohio. I agree that in the event that any clause or provision of this Release is deemed invalid, the enforceability of the remaining provisions of this Release shall not be affected.

By signing below, I express my understanding and intent to enter into this Release and Waiver of Liability willingly and voluntarily

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Signature

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Date