

Volunteer Application Form

(Please complete all sections)

Name:			
(Last)	(First)	(Midd	le Initial)
Street Address:	City:	State:	_Zip:
Phone: Home ()	Cell: ()		-
Email:			
Availability			
□ Weekdays □ Weekends			
Number of hours available per week?			
How did you hear about our Volunteer Progr	am?		
BTA Member? Ves No			
Emergency Contact Information Please give the name of the person we should	contact in an emerge	ency:	
Name:	Relationship to you	1:	
Phone: ()			

Employment

Are you currently:
□ Employed □ Full-time student □ Retired □ Other: _______ Employer/School/Former employer ______ Does your company match funds with the hrs. you volunteer? □ Yes □ No Do you need to complete community service hours? □ Yes □ No If yes, hours required ______

Skills/Interests (check all)

- □ Teacher/Retired Teacher
- □ Texas Master Naturalist
- □ Bilingual (Language(s):
- □ Interpretation/Field Trip Guide/Public Speaking
- Design/Writer/Social Media
- □ Fundraising/Philanthropic Giving
- □ Special Events
- Deckhand/Kayak/Canoe Guide
- Other

Big Thicket Association Volunteer Release and Indemnification Agreement

__, understand that the following agreements are a prerequisite to my participation in the volunteer program for the Big Thicket Association and, further, I understand that these agreements are made in consideration of the Big Thicket Association allowing me to participate in the volunteer program.

I recognize my participation in a Big Thicket Association program is on a voluntary basis. I understand that Big Thicket Association is under no obligation to use my services in the volunteer program and may terminate the use of my volunteer services at any time without notice to me.

I further acknowledge and understand that I will receive no compensation, wages, insurance coverage, or any other employment benefits for my work for the Big Thicket Association. While providing volunteer services, I will follow any rules or requirements set forth by Big Thicket Association I understand that Big Thicket Association has sole discretion to assign tasks to volunteers and may change these assigned tasks without notice to me.

INDEMNITY AND RELEASE: I, THEREFORE, AGREE TO INDEMNIFY AND HOLD THE BIG THICKET ASSOCIATION, ITS OFFICERS, AGENTS, AND EMPLOYEES HARMLESS FROM ALL CLAIMS OF ANY CHARACTER, TYPE, OR DESCRIPTION, INCLUDING, BUT NOT LIMITED TO NEGLIGENCE, GROSS NEGLIGENCE, AND/OR WILLFUL AND MALICIOUS CONDUCT ARISING OUT OF MY PARTICIPATION IN THE VOLUNTEER PROGRAM FOR THE BIG THICKET ASSOCIATION. I ALSO RELEASE AND HOLD THE BIG THICKET ASSOCIATION, THEIR OFFICERS, AGENTS AND EMPLOYEES HARMLESS FROM ALL CLAIMS OF ANY CHARACTER, TYPE, OR DESCRIPTION, INCLUDING, BUT NOT LIMITED TO, NEGLIGENCE AND/OR GROSS NEGLIGENCE, WHETHER OR NOT SUCH NEGLIGENCE IS CAUSED BY AN OFFICER, EMPLOYEE, OR VOLUNTEER OF THE BIG THICKET ASSOCIATION, RESULTING IN ANY INJURY TO MYSELF OR MY PROPERTY BECAUSE OF MY PARTICIPATION IN THE VOLUNTEER PROGRAM.

(Signature of Volunteer)

(Date)

If you are under 18 years of age, you must have a legal guardian sign below.

Guardian Name (print):

Signature: Date:

In accordance with the Americans with Disabilities Act, we will not discriminate on the basis of handicap/disability and will attempt to make reasonable accommodations in all volunteer programs.

Please return this form to:

Big Thicket Association 700 North Street, Suite 79 Beaumont, TX 77701

Email: director@bigthicket.org