



YES, I want to be a part of the Music4Change C.O.R.P.S.!

Volunteer Application Form

Last Name: _____ First Name: _____ Date: _____

*Name of Parent or
Guardian if under 16 years (must be 14 years+): _____

Address: _____ Tel: _____

Email: _____

Date of Birth: _____ Driver's License No. _____

Emergency

Contact: _____
(Name) (Tel. # - Indicate Home, Work or Cell) (Relationship)

Do you have any friends/family members who are employed or volunteer here? ____ Yes ____ No

When are you available to volunteer (hours of availability)?

Monday _____ Tuesday _____ Wednesday _____ Thursday _____ Friday _____

Saturday _____ Sunday _____ Holidays only _____

Types of volunteer work you think you'd be most comfortable with:

___ Helping with a group activity

___ Working one on one

List Your Past Volunteer Experiences:

Organization: _____ Duties _____ Mo/Yr. to Mo./Yr. _____

Organization: _____ Duties: _____ Mo/Yr. to Mo./Yr. _____

Have you been convicted of a crime? No ____ Yes ____ If yes, please describe: _____

BACKGROUND CHECK: Recreational Music Center requires volunteers working with youth to submit to a Live Scan. Screening must be completed before volunteers begin working with youth.

I agree to have a background check.

REFERENCES: List two people, not related to you who have knowledge of your qualifications.

Name: _____ Mailing Address: _____

Tel. No.: _____

Name: _____ Mailing Address: _____

Tel. No.: _____

As a volunteer for Music4Change C.O.R.P.S., I agree to abide by all applicable rules and regulations of the organization. I understand that I will receive no monetary benefits in return for my volunteer service and that Recreational Music Center may terminate this agreement at any time without prior notice for any reason. I hereby authorize Recreational Music Center to check my references, and I understand that a criminal background check is required.

I certify that my answers on this application are true and complete and that I have not knowingly withheld any information that might, if disclosed, affect my application unfavorably. I understand that any misrepresentation or omission of facts on this application could be cause for rejection of this application or dismissal.

I understand that after I submit my application, it will be reviewed and my eligibility for volunteer work will be determined. I agree to an interview with the on site manager and on site orientation to perform my volunteer role.

I hereby Release and Waive liability against Recreational Music Center, a non-profit corporation, its directors, officers, employees and agents, its successors and assigns, for any injuries or illness that I myself or my dependent may suffer in connection with any volunteer work for Recreational Music Center. Further, I agree that Recreational Music Center, Inc., is not liable for any damage to my property or my dependent's property resulting from volunteer work for Recreational Music Center. I agree that this release is as broad and inclusive as permitted by the laws of the State of California.

Volunteer Signature: _____ **Date:** _____