ARTHUR J. TURNER JR. SCHOLARSHIP FOUNDATION

VOLUNTEER APPLICATION FORM

Volunteer Contact Infor	mation:			
Name:				
Address:				
City:		_State:	Zip:	
Home Phone:	Cell Phone:			
Email Address:	Birth Date:		Age:	
Please answer the following q	uestions:			
How did you learn about volun	teer opportunities with A	JTJSF?		
Are you volunteering to fulfill of	community service or vol	lunteer requir	ements? YES:	NO:
If YES, name of organization o	r court system:			
Do you have any physical or m	ental condition(s) that sh	ould be consi	dered in arranging	g volunteer?
Assignment ? YES: N	IO:			
If YES, please list:				
Have you ever been charged wi	th or convicted for a viol	ation of a fed	eral, state, or cou	nty law?
YES: NO:				
If YES, please explain:				
List any special skills, backgrou	und, or training (anything	g you do well)	for consideration	1:
I am willing to volunteer for t	he:			
Spelling Bee Competitio	ns			
Marketing, Event Planner, Set MC, Judging, Time Keeper, Ar				egistration, Gifts,

____ Essay Writing Contest

Marketing, Event Planning, Registration, Submission, Review, Judge

__Math Competition

Marketing, Event Planner, Set Up/ Break Down, Food Preparation, Greeters/Servers, Registration, Gifts, Judging, Time Keeper, Arbitrator, Pronouncer, Moderator, Photographer, Survey-

_____ 5K Run/Walk

Marketing, Event Planner, Set Up/Break Down, Registration, Water Line, Fruit and Breakfast Servers, Breakfast Preparation, Greeters, Script Sign Up, T- Shirt Sales, Mailing List and Volunteer Drive, Photographer, Vendors-

____College 101 Workshop

Marketing, Event Planner, Presenters, Set Up/ Break Down, Registration, Gifts, Packets, Food Preparation, Photographer, Survey-

____ Net Working Event (Breakfast/BBQ)

Marketing, Event Planner, Setup/Break Down, Chef/Caterer, Server, Greeter, Registration, Silent Auction, Raffles, Entertainment, Photographer -

____Gala/Silent Auction

Marketing, Event Planner, Setup/Break Down, Silent Auction Management, Registration/Check in /Seating, Photography (Photo Booth)-

Other Volunteer Areas Are:

Committee Mem	bersTe	achersTut	oringProgram N	Management
Graphic	Fundraising	Marketing	Web Design	Administration
Media Managem	entPho	tographer	Equipment Managemer	tOther
I am available to	o volunteer	hours per w	eek ORhou	rs per month

My preference is (please list) Weekday/Weekend and Hours of Availability.

For additional volunteer information or question, please contact:

AJTJSF Volunteer Recruitment P. O. BOX 814 Bear, DE 19701 ajtjscholarship@gmail.com 302 -376-1704

EMERGENCY CONTACT INFORMATION:

Name:	Relationship:	
Contact's Home Phone:	Cell Phone:	
Physician:	Office Phone:	
Hospital Preference:		

UNDERAGE VOLUNTEERS:

If under 18 years of age, please provide the following:

Name of parent or guardian:	
1 0	

Parent/Guardian home phone: _____ Cell Phone: _____

Parent/Guardian Authorization_____

In the event of an accident or emergency, I give AJTJSF full permission to authorize medical treatment. If I have any particular medical condition(s) or drug allergies that should be considered in the case of a medical event or emergency, I will list these below. If I am under 18 years of age, I understand that a parent or guardian must also sign this Medical Authorization.

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The AJTJSF Volunteer Disclaimer:

Please read and sign below to agree to the terms:

As a registered volunteer for the AJTJSF and for all volunteer related events and activities, you do hereby discharge the AJTJSF, the event site, their management, officers, board members, employees, sponsors, volunteers, representatives and their successors, and all cooperation businesses and organizations, from all claims of damages, demands, actions and causes whatsoever in any manner arising from or growing out of your participation in a AJTJSF activity, event or fundraiser.

As a volunteer, you agree to indemnify and hold the AJTJSF harmless for all fines, penalties, fees and expenses incurred as a result of or related to any breach of contractual obligation to the participant.

By completing and submitting this form to the AJTJSF, you understand and agree to the following:

I will conduct all volunteer activities with high standards, professionalism, and honesty, and will do nothing to cause detriment to the reputation or goodwill of the AJTJSF.

Any contributions to the AJTJSF, that I receive ("Individual Contributions") and any contributions and or donation that I make will align with the (Conflict of Interest Statement of AJTJSF) be given or submitted to AJTJSF (officer) at the time of event or mailed within (7) business days, following the conclusion of any event and or activity. All contributions will be paid in United States dollars; checks or money orders will be made payable to "AJTJSF" and sent to:

AJTJSF, P.O. Box 814 Bear, Delaware 19701 - Attention: Volunteer and Community Partnership.

I will not represent that the AJTJSF is a producer, co producer, sponsor, or presenter of the activity.

If the AJTJSF determines, in its sole discretion, that the Fundraiser or related activities could injure the goodwill or reputation of AJTJSF, AJTJSF may terminate this activity immediately. Upon the expiration or sooner termination of Fundraiser, I shall discontinue using the AJTJSF name and logo and all materials that reference the Fundraiser.

I declare the information provided by me in this Application is true, correct and complete, and intend to be legally bound by its terms.

By clicking "I agree" below, you declare that you have read, understand, and agree to the terms of this agreement.