Silver Lake Nature Center

Volunteer Work Day Form

_____ Home Phone #: _____
First *Last* *Area Code* *Number*

Address: _____
Street *Apt. #* *City* *State* *Zip Code*

Email Address: _____ Birthday: _____

Occupation: _____

Are you a member of Silver Lake? Y N

Who referred you to Silver Lake or how did you hear of us? _____

Why are you volunteering (circle one and, if applicable, give name of school or organization):
Out of the goodness of my heart Organization Affiliation School Requirement Mandated

Do you have any physical or medical conditions we should be aware of? _____

1st Emergency Contact Person's Name(s): _____ Phone Number(s): _____

2nd Emergency Contact Person's Name(s): _____ Phone Number(s): _____

Photo Release: Do you allow us to use any pictures taken of you while volunteering at Silver Lake Nature Center? Yes No

Have you ever been convicted of a felony or misdemeanor? Please note that a record of conviction does not disqualify you from employment. Conviction of a crime that is related to the position applied for will be reviewed and all circumstances will be considered.

☐ No ☐ Yes Explain details _____

Volunteer Agreement and Signature

I affirm the information given on this application to be true to the best of my knowledge and hereby release the Bucks County Department of Parks and Recreation, Friends of Silver Lake Nature Center, and any employees or volunteers thereof, from any liability that might be incurred during the course of the project or program. I also give my permission to keep this information related to my volunteer activities on file for future reference.

I agree to conduct myself in a professional and friendly manner at all times while volunteering at the Center, as well as maintain a clean appearance and wear appropriate attire, and I understand that my job as a volunteer is to help SLNC work towards its mission.

I understand it is my responsibility to be dependable and punctual when I am scheduled to work at the Center and agree to be on time on my scheduled days. I understand that I must contact the Center to inform the staff if I cannot make it when I am scheduled.

I understand that if and when I become a regularly assigned volunteer, that by December 31, 2015 (and every 36 months afterwards) I will need to get a PA criminal background check.. If I plan to teach as a volunteer or per diem, I will also need a PA child abuse history clearance, as well as the possibility of FBI fingerprinting clearance. This is according to Pennsylvania's Domestic Relations Code (23 PA. C. S.), PA Act 153 of 2014.

Volunteer Signature: _____ Date _____

Signature of parent or guardian if under 18: _____ Date _____

Parent or guardian name: *please clearly print:* _____