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##### **2024 Teen Summer Volunteer Program Registration**

**Registrant Information:**

Do you want to help the environment and learn about working at a nature center? This summer we will hold a regular outdoor volunteer workdays for students aged 13 and up. Come and spend time working on our 30-acre property with other like-minded young people. We’ll work on clearing invasive vines, planting, weeding, mulching, trail maintenance, caring for young trees in our reforestation areas, and more! The volunteer morning will run every Wednesday from 9.30am to 12.00pm beginning on June 26 and ending August 7but there is no minimum requirement of days to sign up – come once or as many times as you would like!

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parents’ Names: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Work/Mobile phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ School: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**How did you hear about Riverbend?**

**Why are you interested in volunteering this summer?**

**Please list any skills or previous experiences that could be of benefit as a Riverbend volunteer:**

***The program will be offered from 9:30am – 12:00pm on Wednesdays beginning on June 26 and running through until August 7 (with one week off the week of July 4). All participants must return this form by email to eschad@riverbendeec.org. A signup genius will be emailed to allow participants to register in advance for specific dates. If storms are forecast, we may need to cancel at short notice.***

**Volunteer Emergency Contacts & Liability Waiver**

Name of Volunteer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

This form must be completed before volunteer can begin work at Riverbend. All information will remain confidential.

**Emergency Contact Information**

|  |  |  |
| --- | --- | --- |
| Name | Phone | Relationship |
|  |  |  |
|  |  |  |
|  |  |  |

Doctor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Insurance Provider: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Policy Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Medical Information**

Allergies:

Medical Conditions (that may affect your ability to do certain tasks.):

Is there any other information that Riverbend should know that might be useful in an emergency?

**Liability Waiver:**

The undersigned agrees not to hold Riverbend Environmental Education Center and its employees responsible for any liability resulting from negligence on the part of the participant or others not employed by or representing Riverbend. The undersigned also agrees not to hold Riverbend responsible for any expenses, claims, or losses over and above its equitable share of liability or for any amount in excess of actual economic damage.

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Volunteer Signature Date

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Parent/Guardian Signature (if volunteer is under 18) Date

Please return this form to Lorna Atkinson at the address below or e-mail to latkinson@riverbendeec.org