

Volunteer Application



Contact Information

| | |
|---------------------|--|
| Name | |
| Street Address | |
| City State Zip Code | |
| Home Phone | |
| Cell Phone | |
| E-Mail Address | |

(Can we call in a moment's notice for urgent matters? Yes No)

Availability

During which hours are you available for volunteer assignments? Specify times below:
The Center is open various hours 7 days a week, closed holidays.

- Weekday mornings Weekend mornings
- Weekday afternoons Weekend afternoons
- Weekday evenings Weekend evenings

Interests

Tell us in which areas you are interested in volunteering

- Administration (Data entry, copying, sorting, filing)
- Events (Set up, clean up, parking management, planning)
- Facility Greeter (Greet visitors, give tour, provide literature, provide basic help, register transactions)
- Fundraising (Planning, organizing, B2B cold calls/emails)
- Transportation (Provide area transportation, pick up/delivery of Veterans and/or run errands)
- Housekeeping (Vacuum, wipe tables, clean restrooms, empty trash, general cleaning)
- Labor (Heavy lifting, moving, building, construction, maintenance)
- Volunteer coordination (Contacting volunteers, scheduling and coordinating)

Special Skills or Qualifications

Summarize special skills and qualifications you have acquired from employment, previous volunteer work, or through other activities, including hobbies or sports.

Previous Volunteer Experience

Summarize your previous volunteer experience.

| |
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|--|

Person to Notify in Case of Emergency

| | |
|---------------------|--|
| Name | |
| Street Address | |
| City State Zip Code | |
| Home Phone | |
| Cell Phone | |
| E-Mail Address | |

Agreement and Signature

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as a volunteer, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal.

| | |
|----------------|--|
| Name (printed) | |
| Signature | |
| Date | |

Our Policy

It is the policy of this organization to provide equal opportunities without regard to race, color, religion, national origin, gender, sexual preference, age, or disability.

Thank you for completing this application form and for your interest in volunteering with us.

Your Volunteer Coordinator is:

Joyce Harvey
734-224-7032

You can call or text if you have any questions, or need to change or cancel your schedule.

See reverse side for more information →

CONFIDENTIALITY AND NON-DISCLOSURE AGREEMENT

THIS AGREEMENT is entered into by and between Bedford Twp. Veterans Center, a 501(c)(3) Non-Profit Organization ("Facility"), and _____ ("Volunteer"), to record Volunteer's agreement to maintain the confidentiality of certain information available to or acquired by him/her during the course of his/her service. For this purpose the parties agree as follows:

1. Confidential Information: "Confidential Information" as used herein, means any information relating to Bedford Twp. Veterans Center, its clients, client information, finances, business practices, and any and all similar matters. The Confidential Information is and shall remain the sole and exclusive property of Facility. Volunteer may not at any time during his/her service or subsequent thereto for any reason, with or without cause, directly or indirectly, use for any purpose or disclose or distribute to any person, corporation, partnership, sole proprietorship, governmental agency, organization, joint venture, or other entity any of the Facility's Confidential Information except as required by order of a court of competent jurisdiction. Confidential Information shall not include: (i) information which was in the public domain at the time of disclosure; (ii) information that was in the possession of the Volunteer (other than through the Facility) without any obligation to maintain its confidentiality prior to the time of his/her service; or (iii) information, though originally confidential, which subsequently becomes part of the public knowledge or literature, other than through a breach of an obligation of confidentiality as of the date of its becoming part of the public or literature.
2. Non-disclosure: All Confidential Information shall be and remain the Facility's property and shall be treated by the Volunteer as the Facility's Confidential Information. Volunteer shall maintain all Confidential Information in the strictest confidence and shall take all necessary precautions needed to preserve its confidentiality. Volunteer shall protect Confidential Information by using the highest degree of care and shall be liable for any unauthorized disclosure during or subsequent to his/her service with the Facility.
3. Return of Confidential Information: Upon notice to the Volunteer by the Facility, Volunteer shall immediately return to the Facility any and all Confidential Information (or such Confidential Information as Facility requests), whether written or recorded in any form (including limitation by means of mechanical or electrical recording or data compilation), and whether derived directly or indirectly from information, writings, or recordings supplied by Facility. In any event, the confidential obligations imposed herein will continue to be binding upon Volunteer.
4. Reliance Upon Covenants: Volunteer acknowledges that the restrictions contained in this Non-Disclosure Agreement are a reasonable and necessary protection of the legitimate business interests of the Facility. Volunteer also agrees that it may be impossible to measure in monetary terms the damages that will accrue to the Facility by reason of a breach by the Volunteer of such restrictions, that a violation of such restrictions will cause irreparable injury to the Facility, and

that the Facility shall be entitled, in addition to any other rights and remedies it may have, at law or in equity, to apply to a court of competent jurisdiction for an injunction to restrain Volunteer from violating or continuing to violate such restriction. Nothing in this paragraph shall be deemed to limit the right of the Facility to recover damages caused by any breach of Volunteer.

5. Applicable Law: This Non-Disclosure Agreement shall be interpreted in accordance with the laws of the State of Michigan. This Non-Disclosure Agreement supplements and does not supersede Volunteer's obligations under other law or agreements, including without limitation, under the Michigan Uniform Trade Secrets Act.

6. Survival: The provisions of this Non-Disclosure Agreement are independent of any other agreement by and between the parties and shall remain in full force and effect unless terminated or modified by a writing signed by both the Facility and the Volunteer.

IN WITNESS WHEREOF, Facility and Volunteer have executed this Agreement as of the date set forth below.

BEDFORD TWP. VETERANS CENTER

Facility Signature _____ Date _____

Volunteer Signature _____ Date _____

WAIVER AND RELEASE OF LIABILITY

In consideration of the risk of injury while participating in _____ (the “Activity”), and as consideration for the right to participate in the Activity, I hereby, for myself, my heirs, executors, administrators, assigns, or personal representatives, knowingly and voluntarily enter into this waiver and release of liability and hereby waive any and all rights, claims or causes of action of any kind whatsoever arising out of my participation in the Activity, and do hereby release and forever discharge **Bedford Twp. Veterans Center, located at 760 W. Temperance Rd., Michigan 48182**, their affiliates, managers, members, agents, attorneys, staff, volunteers, heirs, representatives, predecessors, successors and assigns, for any physical or psychological injury, including but not limited to illness, paralysis, death, damages, economical or emotional loss, that I may suffer as a direct result of my participation in the aforementioned Activity, including traveling to and from an event related to this Activity.

I AM VOLUNTARILY PARTICIPATING IN THE AFOREMENTIONED ACTIVITY AND I AM PARTICIPATING IN THE ACTIVITY ENTIRELY AT MY OWN RISK. I AM AWARE OF THE RISKS ASSOCIATED WITH TRAVELING TO AND FROM AS WELL AS PARTICIPATING IN THIS ACTIVITY, WHICH MAY INCLUDE, BUT ARE NOT LIMITED TO, PHYSICAL OR PSYCHOLOGICAL INJURY, PAIN, SUFFERING, ILLNESS, DISFIGUREMENT, TEMPORARY OR PERMANENT DISABILITY (INCLUDING PARALYSIS), ECONOMIC OR EMOTIONAL LOSS, AND DEATH. I UNDERSTAND THAT THESE INJURIES OR OUTCOMES MAY ARISE FROM MY OWN OR OTHERS’ NEGLIGENCE, CONDITIONS RELATED TO TRAVEL, OR THE CONDITION OF THE ACTIVITY LOCATION(S). NONETHELESS, I ASSUME ALL RELATED RISKS, EITHER KNOWN OR UNKNOWN TO ME, OF MY PARTICIPATION IN THIS ACTIVITY, INCLUDING TRAVEL TO, FROM AND DURING THIS ACTIVITY.

I agree to indemnify and hold harmless **Bedford Twp. Veterans Center** against an any all claims, suits or actions of any kind whatsoever for liability, damages, compensation or otherwise brought by me or anyone on my behalf, including attorney’s fees and any related costs, if litigation arises pursuant to any claims made by me or by anyone else acting on my behalf. If **Bedford Twp. Veterans Center** incurs any of these types of expenses, I agree to reimburse **Bedford Twp. Veterans Center** without delay.

I acknowledge that **Bedford Twp. Veterans Center** and their directors, officers, volunteers, representatives and agents are not responsible for errors, omissions, acts of failures to act of any party or entity conducting a specific event or activity on behalf of **Bedford Twp. Veterans Center**.

I ACKNOWLEDGE THAT THIS ACTIVITY MAY INVOLVE A TEST OF A PERSON’S PHYSICAL AND MENTAL LIMITS AND MAY CARRY WITH IT THE POTENTIAL FOR DEATH, SERIOUS INJURY, AND PROPERTY LOSS. The risks may include, but are not limited to, those caused by terrain, facilities, temperature, weather, lack of hydration, condition of participants, equipment, vehicular traffic and actions of others, including but not limited to, participants, volunteers, spectators, coaches, event officials and event monitors, and/or producers of the event.

I ACKNOWLEDGE THAT I HAVE CAREFULLY READ THIS “WAIVER AND RELEASE” AND FULLY UNDERSTAND THAT IT IS A RELEASE OF LIABILITY. I EXPRESSLY AGREE TO RELEASE AND DISCHARGE BEDFORD TWP. VETERANS CENTER AND ALL OF ITS AFFILIATES, MANAGERS, MEMBERS, AGENTS, ATTORNEYS, STAFF, VOLUNTEERS, HEIRS, REPRESENTATIVES, PREDECESSORS, SUCCESSORS AND ASSIGNS, FROM ANY AND ALL CLAIMS OR CAUSES OF ACTION AND I AGREE TO VOLUNTARILY GIVE UP OR WAIVE ANY RIGHT THAT I OTHERWISE HAVE TO BRING A LEGAL ACTION AGAINST BEDFORD TWP. VETERANS CENTER FOR PERSONAL INJURY OR PROPERTY DAMAGE.

In the event that I should require medical care or treatment, I agree to be financially responsible for any costs incurred as a result of such treatment. I am aware and understand that I should carry my own health insurance.

In the event that any damage to equipment or facilities occurs as a result of my or my family’s willful actions, neglect or recklessness, I acknowledge and agree to be held liable for any and all costs associated with any actions of neglect or recklessness.

This Agreement was entered into at arm’s-length, without duress or coercion, and is to be interpreted as an agreement between two parties of equal bargaining strength. Both the Participant, and **Bedford Twp. Veterans Center** agree that this Agreement is clear and unambiguous as to its terms, and that no other evidence will be used or admitted to alter or explain the terms of this Agreement, but that it will be interpreted based on the language in accordance with the purposes for which it is entered into.

In the event that any provision contained within this “**Waiver and Release of Liability**” shall be deemed to be severable or invalid, or if any term, condition, phrase or portion of this agreement shall be determined to be unlawful or otherwise unenforceable, the remainder of this agreement shall remain in full force and effect, so long as the clause severed does not affect the intent of the parties. If a court should find that any provision of this agreement to be invalid or unenforceable, but that by limiting said provision it would become invalid and enforceable, then said provision shall be deemed to be written, construed and enforced as so limited.

In the event of an emergency, please contact the following person(s) in the order presented:

| Emergency Contact | Contact Relationship | Contact Telephone |
|--------------------------|-----------------------------|--------------------------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |

I, the undersigned participant, affirm that I am of the age of 18 years or older, and that I am freely signing this agreement. I certify that I have read this agreement, that I fully understand its content and that this release cannot be modified orally. I am aware that this is a release of liability and a contract and that I am signing it of my own free will.

Participant’s Name: _____

Participant’s Address: _____

Signature: _____ Date: _____

IN WITNESS WHEREOF I have executed this Release on _____.

Witness’s Name: _____

Witness’s Signature: _____

PARENT/GUARDIAN WAIVER FOR MINORS

In the event that the participant is under the age of consent (18 years of age), then this release must be signed by a parent or guardian, as follows:

I hereby certify that I am the parent or guardian of _____, named above, and do hereby give my consent without reservation to the foregoing on behalf of this individual.

Parent/Guardian Name: _____

Relationship to Minor: _____

Signature: _____ Date: _____

Bedford Twp. Veterans Center Sexual Harassment Policy

Effective Date: March 30, 2018

I. APPLICABILITY:

1. This procedure is applicable to all volunteers and staff of Bedford Twp. Veterans Center.
2. This policy, and all policies and procedures put in place by this organization, shall be in effect for all full-time, part-time, and contracted volunteers and staff now in place or those put in place after the effective date of this policy.
3. For the purpose of this and all policies put in place by this organization, the term volunteer(s) and staff shall include all full-time, part-time and contracted volunteers and staff of Bedford Twp. Veterans Center.

II. SCOPE:

1. Bedford Twp. Veterans Center will make every effort to ensure that the control systems in place are sound and are designed, amongst other things, to prevent Sexual Harassment in the Workplace.

III. OBJECTIVE:

1. In order to provide a productive and pleasant working environment, it is important that we at Bedford Twp. Veterans Center endeavor to maintain a workplace characterized by mutual respect. Accordingly, Sexual Harassment in our Workplace will not be tolerated.

IV. KEY PRINCIPLES:

1. Compliance with internal controls and procedures.
 - a. Volunteers and staff shall ensure that they comply with all controls and procedures established by this policy, including those designed to prevent Sexual Harassment in the Workplace.
 - b. Each volunteer and staff is responsible for knowing and understanding the policies that are in place within this organization.

- c. Each employee is required to sign annually that they have read and understand the policies that are in place within this organization.
- d. All volunteers and staff shall take reasonable steps to ensure that all controls are complied with by others within the organization. This is particularly crucial for senior stakeholders with management responsibility.
- e. Volunteers and staff shall make every effort to be aware of the potential consequences of a failure in control procedures, and shall take all reasonable steps to ensure that such control procedures are sufficient to prevent Sexual Harassment in the Workplace.
- f. If during normal activities, an employee identifies a problem or weakness in the control procedure, the employee shall report the concern immediately.
- g. A volunteer or staff's failure to report problems or concerns with this policy undermines the organizations control framework.

2. Volunteer or Staff Reporting Procedure.

- a. Any Bedford Twp. Veterans Center volunteer or staff who feels that he or she has been sexually harassed shall immediately bring the issue to the attention of Tim FitzGerald, Director.
- b. In the event that Tim FitzGerald is the person that the complaint is regarding or in Tim FitzGerald's absence all reports of Sexual Harassment will be handled by Joyce Harvey, Assistant Director.
- c. Inquiries and/or complaints will be investigated as quickly as possible.
- d. Any and all allegations of Sexual Harassment shall be reported in confidence following the reporting hierarchy previously outlined. Confidentiality is important not only to protect the innocent but also to ensure that an opportunity is not available to cover up inappropriate activity or to destroy potential evidence of such activity.
- e. Any investigation will be conducted in as confidential manner as is compatible with a thorough investigation of the complaint.

3. Prohibited Activities.

Sexual Harassment has been defined as a form of sex discrimination, consisting of **unwanted** sexual advances. Examples of prohibited Sexual Harassment include but are not limited to:

- a. Supervisors or managers explicitly or implicitly suggesting sex, or sexual favors, in return for hiring, compensation, promotion or retention decisions.
- b. Verbal or written sexually suggestive or obscene comments, jokes, or propositions.
- c. **Unwanted** physical contact, such as touching, grabbing, or pinching.
- d. Displaying sexually suggestive objects, pictures, or magazines.
- e. Continual expressions of sexual or social interest after an indication that such interest is not desired.
- f. Conduct with sexual implications when such conduct interferes with the employee's work performance or creates an intimidating work environment.
- g. Suggesting or implying that failure to accept a request for a date or sex would adversely affect the employee in respect to a performance evaluation or promotion.

4. Harassment by Non-Volunteers and staff.

We at Bedford Twp. Veterans Center will endeavor to protect our volunteers or staff, to the extent possible, from harassment by non-volunteers or staff such as visitors, clients, vendors and other parties with whom we have workplace contact with.

5. Discipline.

- a. Any Bedford Twp. Veterans Center volunteer or staff found to have harassed another volunteer or staff, or an applicant for services, will be subject to appropriate disciplinary procedure action, including reprimands, suspension and/or termination of service.

b. A person committing Sexual Harassment in the Workplace may also be held legally liable for his or her actions under applicable law.

6. Responsibility

a. Each person is responsible for implementing this policy.

V. CONCLUSION:

1. This policy is being put in place as a safe guard for Bedford Twp. Veterans Center and its volunteers and staff.
2. This policy shall supersede all previous policies written by and for Bedford Twp. Veterans Center regarding Sexual Harassment.
3. As previously noted this policy shall be effective as of March 30, 2018.
4. This policy shall remain in effect for a period of one (1) year, at which point it shall come due for revision or removal.

VI. APPROVAL:



Tim FitzGerald, Director
Bedford Twp. Veterans Center