

Please forward the completed form to info@harvestacresfarm.org



Harvest Acres Farm

425 Kingstown Road, Richmond, RI 02892

401-789-8752 (Farm Shop)

401-480-0299 (Program Office)

VOLUNTEER APPLICATION

TYPE OF VOLUNTEERING (PLEASE CHECK ALL THAT APPLY):

- | | |
|--|---|
| <input type="checkbox"/> To work with our members (background check is required for this) | <input type="checkbox"/> As a musician at events |
| <input type="checkbox"/> To help maintain trails | <input type="checkbox"/> To bake for events |
| <input type="checkbox"/> To help plant flowers, water & weed garden beds | <input type="checkbox"/> To do general maintenance or landscaping |
| <input type="checkbox"/> To help with woodworking projects | <input type="checkbox"/> Computer maintenance |
| <input type="checkbox"/> At events | <input type="checkbox"/> To fundraise |
| | <input type="checkbox"/> To help write grants |

VOLUNTEER INFORMATION

Volunteer's last name:	First:	Middle:	Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female
Home Address:	City/Province:	Postal Code:	
Cell phone: ()	Email Address:		

Are you volunteering with a group? _____ If so, who? _____

How did you find us? Website Friend/Family Newspaper Event Other _____

EMERGENCY CONTACT INFORMATION

Emergency Contact Name:	Relationship to Volunteer:	Phone Number: (home) ()	Phone Number (cell) ()
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IF YOU CHECKED THE BOX FOR WORKING WITH OUR MEMBERS

What experience and/or credentials do you have?

SIGNATURE

Signature:	Date:
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WAIVER Must be read and signed: I hereby release Harvest Acres Farm from any claim of damage or injury resulting from my participation in Harvest Acres Farm Volunteer Activities. I understand that participation in the Volunteer Activities involves certain risks, including, but not limited to, walking, lifting, raking, pruning, planting, carrying and using various hand tools and power tools. I am voluntarily participating in the Volunteer Activities with knowledge of the danger involved and I agree to accept all risks of participation. Further, I hereby grant permission to any and all of the foregoing to use my photograph, video, or any other record of this event for any legitimate purpose.

Signature _____ Date _____
(Signature of parent or guardian if volunteer is under 18)