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**VOLUNTEER APPLICATION FORM**

**Volunteer Contact Information**

**Today's Date:** \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ ST \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email address: \_\_\_\_\_ Birth date: \_\_\_\_\_

**Please answer the following questions:**

- Do you have any physical or mental condition(s) that should be considered in arranging volunteer assignments? YES \_\_\_\_\_ NO \_\_\_\_\_ If YES, please explain: \_\_\_\_\_  
\_\_\_\_\_
- Have you ever been charged with or convicted of a violation of a federal, state, or county law?  
YES \_\_\_\_\_ NO \_\_\_\_\_ If YES, please explain: \_\_\_\_\_  
\_\_\_\_\_
- List any special skills, background, or training: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- List any Medical Conditions: \_\_\_\_\_  
\_\_\_\_\_
- List any Drug Allergies: \_\_\_\_\_  
\_\_\_\_\_

• I am available: **S M T W TH F S**    **From:**\_\_\_\_\_ **To:**\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

• Preferred Placement (is not guaranteed)

\_\_\_\_\_  
\_\_\_\_\_

**Emergency Contact Information**

Name:\_\_\_\_\_ Relationship:\_\_\_\_\_

Contact's Home Phone:\_\_\_\_\_ Cell Phone:\_\_\_\_\_

Name:\_\_\_\_\_ Relationship:\_\_\_\_\_

Contact's Home Phone:\_\_\_\_\_ Cell Phone:\_\_\_\_\_

**Underage Volunteers:**

If under 18 years of age, you must have the signed consent of a legal parent or guardian. Please provide the following information:

Name of Parent/Guardian:\_\_\_\_\_

Parent/Guardian's Home Phone:\_\_\_\_\_ Cell Phone:\_\_\_\_\_

By signing below, I certify that my answers are true and complete to the best of my knowledge. I also understand that this is a volunteer application and not a job application.

Volunteer Signature:\_\_\_\_\_ Date:\_\_\_\_\_

Parent/Guardian Signature:\_\_\_\_\_ Date:\_\_\_\_\_

## Release and Waiver of Liability Form

This Release and Waiver of Liability executed on (date) \_\_\_\_\_ by (Volunteer) \_\_\_\_\_ releases **Aberdeen Fear Factory (AFF), ZMS, Pinnacle Furnishings, and John D. Berggren** and each of its directors, officers, employees, and agents. The Volunteer desires to provide volunteer services for AFF and engage in activities related to serving as a volunteer.

Volunteer understands that the scope of Volunteer's relationship with AFF is limited to a volunteer position and that no compensation is expected in return for services provided by Volunteer; that AFF will not provide any benefits traditionally associated with employment to Volunteer; and that the Volunteer is responsible for his/her own insurance coverage in the event of personal injury or illness as a result of Volunteer's service to AFF.

1. Waiver and Release: I, the Volunteer, release and forever discharge and hold harmless AFF and its successors and assigns from any and all liability, claims, and demands of whatever kind or nature either in law or in equity, which arise or may hereafter arise from the services I provide to AFF. I understand and acknowledge that this Release discharges AFF from any liability or claim that I may have against AFF with respect to bodily injury, personal injury, illness, death, or property damage that may result from the services I provide to AFF or occurring while I am providing volunteer services.
2. Insurance: Further, I understand that AFF does not assume any responsibility for or obligation to provide me with financial or other assistance, including but not limited to medical, health or disability benefits or insurance of any nature, at any time, including in the event of my injury, illness, death or damage to my property. I expressly waive any such claim for compensation or liability on the part of AFF beyond what may be offered freely by AFF in the event of such injury or medical expenses incurred by me.
3. Medical Treatment: I hereby Release and forever discharge AFF from any claim whatsoever which arises or may hereafter arise on account of any first-aid treatment or other medical services rendered in connection with an emergency during my tenure as a volunteer with AFF.
4. Assumption of Risk: I understand the services I provide to AFF may include activities that may be hazardous to me including, but not limited to: construction work, painting, climbing, lifting, acting, using equipment, electronics, or animatronics, acting in dark enclosed spaces, and any other inherently dangerous activities. As a volunteer, I hereby expressly assume the risk of injury or harm from these and all activities and Release AFF from all liability for injury, illness, death or property damage resulting from the services I provide as a volunteer or occurring while I am providing volunteer services. I understand that I hereby expressly assume the risk of injury or harm resulting from any use of equipment belonging to **AFF, ZMS, Pinnacle Furnishings, or John D. Berggren.**

5. Photographic Release: I grant and convey to AFF all right, title, and interests in any and all photographs, images, video, or audio recordings of me or my likeness or voice made by AFF in connection with my providing volunteer services to AFF.
  
6. Other: As a volunteer, I expressly agree that this Release is intended to be as broad and inclusive as permitted by the laws of the State of North Carolina and that this Release shall be governed by and interpreted in accordance with the laws of the State of North Carolina. I agree that in the event that any clause or provision of this Release is deemed invalid, the enforceability of the remaining provisions of this Release shall not be affected.

By signing below, I certify that my answers are true and complete to the best of my knowledge, and I express my understanding and intent to enter into this Release and Waiver of Liability willingly and voluntarily. If I would like a copy of the above Release and Waiver of Liability form, it is available upon request.

Volunteer Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## VOLUNTEER BASIC RULES

1. Please sign in and out every day, **NO EXCEPTIONS**. Do not use side employee door for entry or exit.
2. Please inform the supervisor when you go on break or are leaving for the day. When volunteering during Sept-Nov, there will be designated times for break. **DO NOT** leave your position unless there is an emergency.
3. Please take your break in designated areas. You are **NOT ALLOWED** to be in other areas of the factory. If you are in unauthorized areas or loitering in the parking areas other than those designated for Aberdeen Fear Factory, it may be considered trespassing by other tenants of the building.
4. Smoking – Smoking is permitted in designated areas outside near the exits where there is a smoker’s pot. **NO SMOKING IN THE BUILDING**. Please do not throw your cigarette butts down on the ground or in the parking lot. If you cannot adhere to this rule, you may be asked to leave.
5. Absolutely **NO ALCOHOL OR DRUGS ON PREMISES**. If you are seen with alcohol, drugs or are acting in a drunken manner or believed to be under the influence of any drug, you may be asked to leave and not return.
6. Phone calls—Ask your family and friends **not to call** while you are working. Keep cell phones on quiet mode and in your pocket or bag. **NO** cell phone use permitted unless on break.
7. Stick to your scheduled hours of volunteer work. If you are unable to come, please notify the supervisor. If the supervisor is not at AFF, volunteers cannot continue work without supervision, and cannot remain on the premises.
8. Dress appropriately. No open-toe shoes, shirts and pants should be appropriate sizes and lengths. Dress appropriately. Even though you may be wearing a costume, no revealing or inappropriate clothing.
9. Anyone displaying violent/aggressive or any behavior deemed inappropriate by AFF staff will be asked to leave and not return.
10. Weapons – Weapons are not allowed on the property. This includes weapons covered by concealed weapons permit. This includes possessing them, storing them in your vehicle or keeping them in the factory. Weapons include: guns, knives, tasers, pepper spray, shanks, steel batons, etc. If you are caught with any type of weapon, you will be banned!
11. Costumes, masks, and props - Your costume, mask, or prop is your uniform. It must be signed out to you if it leaves the property. As such, you are responsible for these items. Washing and cleaning your costumes, masks, and props are your responsibility. You are liable for any item signed out to you.
12. No “hanging out.” You are here to volunteer to work. If you do not want to work, you do not have to volunteer, but you cannot remain on the premises. You can “hang out” at home.
13. Stay in costume; never be seen in public or by customers in a partial costume.

14. Absolutely no touching the customers, accidents do happen but any physical contact otherwise will result in immediate dismissal.
15. Stealing of any kind will result in dismissal as well as prosecution. This includes, but is not limited to, costumes, gift shop items, props, concessions, etc.
16. Above all have fun...It is why you are here!

By signing below, I certify that I have read and understand the above the rules and agree to abide by them at all times. I also understand that this is a volunteer application and not a job application.

Volunteer Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_