

## Adult Volunteer Form - Hands of the Future, Inc.

**NOTE:** An Adult Volunteer Form must be completed for each adult wanting to work with Hands of the Future Programs, including Junior Nature Club.

Volunteer's Name: \_\_\_\_\_

Birth Date: \_\_\_\_\_ Age: \_\_\_\_\_ Gender: \_\_\_\_\_ Male \_\_\_\_\_ Female

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_ E-mail: \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_

Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

Medical Insurance Co.: \_\_\_\_\_ Policy Number: \_\_\_\_\_

Known Allergies: \_\_\_\_\_

Dietary Restrictions: \_\_\_\_\_

Health Problems/Concerns:

\_\_\_\_\_

Employer: \_\_\_\_\_

Do you have an interest and/or skills in any of these activities?:

\_\_\_\_ Working with children      \_\_\_\_ Arts & Crafts      \_\_\_\_ Baking/Decorating

\_\_\_\_ Story telling/Nature Sharing      \_\_\_\_ Set up/Clean up      \_\_\_\_ Gardening/planting

Would you be willing to have a background check to work with the children? \_\_\_\_\_ Yes \_\_\_\_\_ No

Please check one:

\_\_\_\_ I hereby grant Hands of the Future, Inc. the right to photograph me and use the photo and/or other digital reproduction of me or other reproduction of my physical likeness for publication processes, whether electronic, print, digital or electronic publishing via internet.

\_\_\_\_ Please do not photograph me

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

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