VOLUNTEER APPLICATION & SERVICE AGREEMENT

FULL NAME _____
Last *First* *Middle Initial*

ADDRESS _____
Street Address *Apt./Unit #*

_____
City *State* *ZIP Code*

PHONE _____
Home *Cell*

EMAIL _____

Are you a currently enrolled student? _____
If yes, where?

Are you required to volunteer as part of a program/class? _____
If yes, which program/class?

Are you interested in other volunteer opportunities with BDL? □ YES □ NO

How did you hear about us? □ Friend □ Advertisement □ Advisor □ Other

Are you at least 16 years old? □ YES □ NO

As a volunteer, I understand and agree that I will be representing Beautiful Downtown Lewiston throughout my time of service. I agree to:

- Arrive on time and prepared, and perform duties as assigned during time of service
- Stay for the duration of my assignment unless required by emergency to leave
- Represent BDL in a positive and professional manner at all times during my time of service

VOLUNTEER WAIVER

This waiver, made and entered into between Beautiful Downtown Lewiston (BDL) and the Volunteer named below, recognizes the mutual agreement that BDL does not provide Worker's Compensation or any other types of liability insurance to volunteers. Accordingly, persons such as volunteers are not covered by BDL for any forms of insurance, or to be paid salary, commission, or expenses whatsoever. Through this Volunteer Waiver, the Volunteer does hereby knowingly release and hold faultless and harmless BDL, its Board of Directors, and any employee for any injury, accident, or damage sustained by the Volunteer while serving in such capacity.

_____ _____
Printed Name Signed Name

_____ _____
Parent Signature (if under 18 years old) Date