

MAR VISTA FAMILY CENTER

Volunteer Interest Form

Questions? Contact us at **310.390.9607**
or email us at **volunteer@marvistafc.org**

Note: Volunteers will be asked to show proof of a recent TB skin test if working directly with children.

Personal Information	
Name	
Address	
Phone	
Email	
Birth Day	Current Status: <input type="checkbox"/> Student <input type="checkbox"/> Worker <input type="checkbox"/> Retired

Please list any prior volunteer activities:
What are your present goals for a volunteer position? <input type="checkbox"/> Work Experience <input type="checkbox"/> School Credit <input type="checkbox"/> Personal Fulfillment <input type="checkbox"/> Other:
How did you hear about us? <input type="checkbox"/> Individual Referral <input type="checkbox"/> Internet Search <input type="checkbox"/> Flier <input type="checkbox"/> Email <input type="checkbox"/> Advertisement
Were you referred to Mar Vista Center by someone? If so, please list their name.

School Information	
School/Alma Mater:	
Major	Graduation Year

Work Information	
Company	Title

Emergency Contact Information	
Name	
Relationship To You	
Phone	
Please list any medical conditions or allergies that we should be aware of:	

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Availability						
<input type="checkbox"/> Monday	<input type="checkbox"/> Tuesday	<input type="checkbox"/> Wednesday	<input type="checkbox"/> Thursday	<input type="checkbox"/> Friday	<input type="checkbox"/> Saturday	<input type="checkbox"/> Sunday
<input type="checkbox"/> Morning	<input type="checkbox"/> Morning	<input type="checkbox"/> Morning	<input type="checkbox"/> Morning	<input type="checkbox"/> Morning	Events Only	Events Only
<input type="checkbox"/> Afternoons	<input type="checkbox"/> Afternoons	<input type="checkbox"/> Afternoons	<input type="checkbox"/> Afternoons	<input type="checkbox"/> Afternoons		
<input type="checkbox"/> Evenings	<input type="checkbox"/> Evenings	<input type="checkbox"/> Evenings	<input type="checkbox"/> Evenings	<input type="checkbox"/> Evenings		
<input type="checkbox"/> 4-5:30 PM	<input type="checkbox"/> 4-5:30 PM	<input type="checkbox"/> 4-5:30 PM	<input type="checkbox"/> 4-5:30 PM	<input type="checkbox"/> 4-5:30 PM		
<input type="checkbox"/> 5:30 – 7 PM	<input type="checkbox"/> 5:30 – 7 PM	<input type="checkbox"/> 5:30 – 7 PM	<input type="checkbox"/> 5:30 – 7 PM	<input type="checkbox"/> 5:30 – 7 PM		
<input type="checkbox"/> Other	<input type="checkbox"/> Other	<input type="checkbox"/> Other	<input type="checkbox"/> Other	<input type="checkbox"/> Other		
Additional information about time availability:						

Do you need to fulfill a specific requirement for hours? If so, specify agency/school, total number of hours and deadline	
School/Agency	
Hours Required	Deadline

Skills and Interests	
Check all that apply:	
<input type="checkbox"/> Arts & Crafts <input type="checkbox"/> Cooking <input type="checkbox"/> Reading to Children <input type="checkbox"/> Storytelling for different age groups (Pre-K to 5th) <input type="checkbox"/> Licensed Speech Therapist for pre-K children <input type="checkbox"/> Math Tutoring (High school Level) <input type="checkbox"/> English Tutoring (High school Level) <input type="checkbox"/> Science Tutoring (High school Level) <input type="checkbox"/> Tutoring elementary and middle school children <input type="checkbox"/> Mentoring children and youth <input type="checkbox"/> Inspirational Speaker <input type="checkbox"/> Theater/Acting/Modeling <input type="checkbox"/> Sports officials, coaches and instructors <input type="checkbox"/> Cheerleading/Dance <input type="checkbox"/> Music Instructors <input type="checkbox"/> Video Production	<input type="checkbox"/> Administrative Duties (typing, filing, copying, phones) <input type="checkbox"/> Development (data entry, grant writing, research) <input type="checkbox"/> Fundraising: Holiday Activities <input type="checkbox"/> Web Development (i.e. HTML/CSS, PHP, SQL, etc) <input type="checkbox"/> Social Marketing Media Support <input type="checkbox"/> Photography Instructor <input type="checkbox"/> Marketing/Public Relations <input type="checkbox"/> Special Events (setup, greeting, registration, clean-up) <input type="checkbox"/> English as a Second Language (ESL) <input type="checkbox"/> Computer Instructor for Adults <input type="checkbox"/> Fitness Instructors and/or Nutritionists <input type="checkbox"/> Facility Clean-Up, Maintenance, Organizing Materials <input type="checkbox"/> Library Maintenance <input type="checkbox"/> Festival Performers (Sept. 25th 4-6pm) <input type="checkbox"/> First Aid and CPR Certified <input type="checkbox"/> Other:

Volunteer Release and Waiver of Liability

I release the Mar Vista Family Center, a nonprofit corporation existing under the laws of the State of California, and each of its directors, officers, employees, and agents from any liability.

As I Volunteer, I understand that the scope of my relationship with the Mar Vista Family Center is limed to a volunteer position and that no compensation is expected in return for the services I provide. The Mar Vista Family Center will not provide any benefits traditionally associated with employment and I am responsible for my own insurance coverage in the event of personal injury or illness as a result of my service.

Waiver and Release: I, the Volunteer, release the Mar Vista Family Center 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 the Mar Vista Family Center as a volunteer (i.e. bodily or personal injury, illness, death, property damage or loss, etc.).

Insurance: Further, I understand that the Mar Vista Family Center 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 in the event of injury, illness, death, or damage and/or loss of property. I expressly waive any such claim for compensation or liability on the part of the Mar Vista Family Center beyond what may be offered freely by the Mar Vista Family Center in the event of such injury or medical expenses incurred by me.

Medical Treatment: I hereby release and discharge the Mar Vista Family Center 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 the Mar Vista Family Center.

Assumption of Risk: I understand that the service I provide the Mar Vista Family Center may be hazardous to me and I hereby expressly assume the risk of injury or harm from these activities and release the Mar Vista Family Center from all liability for injury, illness, death or property damage resulting from services I provide as a volunteer or occurring while I am providing volunteer services.

Photo Release

I grant to Mar Vista Family Center, its representative and employees, the right to record my likeness on video, audio, photographic, digital or any other electronic medium.

I allow the Mar Vista Family Center the right to use my likeness for reproduction, exhibition, or distribution in any medium (i.e. print and digital publications, advertisement, video, websites, social media etc.)

I understand that my participation in digital and print publications produced by the Mar Vista Family Center is voluntary and that I will receive no financial compensation.

Signature	Date
Print Name	

Signature of Parent or Guardian (in under 18):
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After completing this application, please email us at volunteer@marvistafc.org to setup an orientation and to validate that we have your information on file. Thank you.