

WILLIAMSON ROCKS

VOLUNTEER APPLICATION

If you want to volunteer (or have already volunteered, but didn't fill out a form), please enter the data below and submit it to us. By filling out this form, you are helping to speed up the process when you arrive to volunteer. Even if you were volunteering on your own, or with a different organization, please fill out this form. If Williamson County qualifies for federal disaster funds, the number of volunteers identified has to do with dollars received. If you have already volunteered, please note the date, number of hours, and where you volunteered in the appropriate fields at the end of the registration form. This is very important information that our county needs. Please do so ASAP.

First Name: _____ Last Name: _____

Age: _____ Day Phone: _____ Evening Phone: _____ Cell Phone: _____

Address: _____

City: _____ State: _____ Zip: _____

Person to notify in case of an emergency: _____ Relationship: _____

Day Phone: _____ Cell Phone: _____

What special skills and/or vocational or disaster training have you had? _____

Do you have a camper or mobile home? Yes ___ No ___

When can you volunteer? During Week? Yes ___ No ___ Saturdays? Yes ___ No ___ Sundays? Yes ___ No ___

What general area(s) of work would you like to be involved in?

Debris Removal ___ Veterinarian Services ___ Warehousing or Intake of Supplies ___

Mass Feeding ___ Distribution of Supplies ___ Childcare ___

Office/Clerical ___ Medical Care ___ Animal Care ___

Transportation ___ Structural Repair ___ Other ___ (explain) _____

Do you have any special equipment (chainsaw, tractor, posthole digger, tractor, truck, etc.? Yes ___ No ___

If Yes, list them: _____

Do you have any specific construction skills? Yes ___ No ___ If yes, list them: _____

Do you own a generator? Yes ___ No ___ Do you have a CDL (commercial Driver's license? Yes ___ No ___

Are you a certified baby sitter or have you ever provided baby sitting services? Yes ___ No ___

Have you already volunteered in this relief effort? Yes ___ No ___ If "No" review all of your information and make sure that it is correct. If every thing is correct, proceed to the signature line below.

If "Yes", Where did you volunteer: _____

What did you do: _____ What dates did you volunteer? _____

How many total hours did you volunteer? _____

Disaster Volunteer Registration Form Release of Liability

I, for myself and my heirs, executors, administrators and assigns, hereby release, indemnify, and hold harmless Fairview High School, all of its employees, local governments, State of Tennessee, the organizers, sponsors and supervisors of all disaster preparedness, response and recovery activities from all liability for any and all risk of damage or bodily injury or death that may occur to me (including any injury caused by negligence), in connection with any volunteer disaster effort in which I participate. I likewise hold harmless from liability any person transporting me to or from any disaster relief activity. In addition, disaster relief officials have permission to utilize any photographs or videos taken of me for publicity or training purposes. I will abide by all safety instructions and information provided to me during disaster relief efforts. Further, I expressly agree that this release, waiver, and indemnity agreement is intended to be as broad and inclusive as permitted by the State of Tennessee, and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect. I have no known physical or mental condition that would impair my capability to participate fully, as intended or expected of me. I have carefully read the foregoing release and indemnification and understand the contents thereof and sign this release as my own free act.

By signing below, I hereby acknowledge: (1) that I am at least 18 years of age, and (2) I agree to the terms stated in the preceding Release of Liability. If under 18, please have parent sign.

Signature _____

Name of parent signing if under 18 years. _____

If you have already volunteered with some group or agency and are just filling this out for the federal aid aspect, please do so and mail to Gene Cotton, 3411 Sweeney Hollow Road, Franklin, TN 37064. This document prints on 8.5X14 paper.

Thank you for taking time to help our neighbors and for making Williamson County a better place to live.