

# Volunteer Application

Bittersweet Farms  
12660 Archbold-Whitehouse Road  
Whitehouse, OH 43571  
(419) 875-6986



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

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

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

Are you over the age of 18? (Circle) Yes No

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

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

Email: \_\_\_\_\_

Alternate Phone: \_\_\_\_\_

## Emergency Contact Information

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

Relationship to you: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Alternate Phone: \_\_\_\_\_

Have you ever been employed or volunteered at Bittersweet Farms before? \_\_\_\_\_

If yes, please list dates and position: \_\_\_\_\_

Where are you currently employed? \_\_\_\_\_

What is your job title? \_\_\_\_\_

Have you ever worked with individuals with Autism/MRDD? If yes, please give a brief explanation.

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

How did you hear about our Volunteer Program? \_\_\_\_\_

Please circle the area(s) you are interested in volunteering: Horticulture Greenhouse Gardening  
Homemaking Arts Music Ceramics  
Weaving Woodshop Painting  
Maintenance Office Farming  
Other: \_\_\_\_\_

Please circle the frequency that you would like to volunteer: One time Once weekly Once a month  
Other: \_\_\_\_\_

What days and times are you available for volunteer work? Please fill in all times that apply.

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

Please list any special skills, qualifications, trainings, certificates, etc.

Have you ever pled guilty or "no contest" to a crime or been convicted of a crime (felony or misdemeanor)?

Please circle one:    Yes        No

Do you have any criminal charges pending?    Please circle one:    Yes        No

I agree to submit to and authorize Bittersweet, Inc. to conduct verification checks of my criminal background, personal and professional references, Bureau of Motor Vehicle Records, and searches of other public and private records as Bittersweet, Inc. deems necessary to secure information regarding me as a volunteer for the capacity I am seeking.

The information provided on this application is true, correct, and complete.

I agree and understand that as a volunteer, Bittersweet, Inc. is not obligated to provide me any payment or benefit for my services. I also agree to release Bittersweet, Inc., its Board of Trustees, employees and agents (collectively Bittersweet, Inc.) from any liability in the event I am injured or suffer damage as a result of the negligence of Bittersweet, Inc. I agree not to pursue any claim or initiate any action against Bittersweet, Inc. in the event that I am injured or suffer damage as a result of the negligence of Bittersweet, Inc. I understand and agree that this express assumption of risk, release and waiver is made on my own behalf and on behalf of my heirs, executors, representatives, assigns and when applicable, my minor child.

I agree to advise Bittersweet, Inc. in writing of any physical limitations which could affect or be affected by any volunteer activities I assume. I understand it is my responsibility to provide this information and I release Bittersweet, Inc. from any liability for injuries or illnesses which result from my failure to advise Bittersweet, Inc. in writing of any such limitations.

I understand that Bittersweet, Inc. may require alcohol, drug and substance abuse screening, and I consent to such an examination and authorize the release of the results of such an examination to Bittersweet, Inc.

I hereby authorize investigation of all statements in this application and request any company, institution, or persons contacted as part of this investigation to provide any and all pertinent information. To assure their cooperation, I hereby release them from all liability for any damage that may result from furnishing same to Bittersweet, Inc.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Parent/Guardian (If applicant is a minor)

\_\_\_\_\_  
Date