



# Volunteer Application and Agreement Form

Please complete and mail original to:

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

**Bel Air Downtown Alliance, Inc.**

ATTN: Christine McPherson

37 N. Main Street

Bel Air, MD 21014

Name: \_\_\_\_\_ Phone (H) \_\_\_\_\_

Address: \_\_\_\_\_ Phone (C) \_\_\_\_\_

\_\_\_\_\_ Date of Birth: \_\_\_\_\_

\*Name of Parent or Guardian if under 18 years: \_\_\_\_\_

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

Company or Volunteer Group Name: \_\_\_\_\_

If student, name of school/organization: \_\_\_\_\_

Do you have a criminal record? Have you been convicted, arrested, charge with a crime, or on probation? YES NO  
If yes please explain:

\_\_\_\_\_

**Areas** \_\_\_\_\_ First Fridays \_\_\_\_\_ Movie Series \_\_\_\_\_ Chocolate & Candy Festival

**Of**

**Interest:** \_\_\_\_\_ BBQ Bash \_\_\_\_\_ Office Support \_\_\_\_\_ Other: \_\_\_\_\_

## Emergency Contact Information

Name #1:

\_\_\_\_\_

(Phone: Indicate Home, Work or Cell)

(Relationship)

Name #2:

\_\_\_\_\_

(Phone: Indicate Home, Work or Cell)

(Relationship)

## Photo Release

I consent to and authorize the use and reproduction by Bel Air Downtown Alliance, Inc. of any all photographs and any other audio-visual materials taken of me for promotional, educational and social media marketing or any other use for the benefit of the Alliance.

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

Parent or Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

(If under 18 years of age)

**VOLUNTEER AGREEMENT AND RELEASE FROM LIABILITY**

1. As a volunteer for the Bel Air Downtown Alliance, Inc. I agree to work during my scheduled time as agreed. I understand that I will not be compensated for any time spent volunteering, nor am I entitled to benefits, including employment insurance benefits upon the termination of this agreement or as a result of this service and that the Bel Air Downtown Alliance, Inc. may terminate this agreement at any time without prior notice for any reason.
2. I am aware that participation as a volunteer may require periods of standing, lifting and carrying up to 40 pounds (i.e. tables/chairs) and will require the exercise of reasonable care to avoid injury. I am voluntarily participating in this activity with knowledge of the hazards and potential dangers involved, and agree to accept any and all risks of personal injury and property damage.
3. As consideration for volunteering for the Bel Air Downtown Alliance, Inc. I hereby agree that I, and my assignees, heirs, guardians, and legal representatives, will not make a claim against or sue Bel Air Downtown Alliance, Inc. or its employees, agents or contractors for injury or damage resulting from the negligence, whether active or passive, or other acts, however caused, by any of its officers, employees, agents, or contractors of Bel Air Downtown Alliance, Inc. as a result of my volunteering. I agree that this release is as broad and inclusive as permitted by the laws of the State of Maryland. I HEREBY RELEASE AND DISCHARGE BEL AIR DOWNTOWN ALLIANCE AND ITS OFFICERS, EMPLOYEES, AGENTS AND CONTRACTORS FROM ALL ACTIONS, CLAIMS, OR DEMANDS THAT I, MY HEIRS, GUARDIANS, AND LEGAL REPRESENTATIVES NOW HAVE, OR MAY HAVE IN THE FUTURE, FOR INJURY OR DAMAGE RESULTING FROM MY PARTICIPATION IN THE PROJECT.
4. I UNDERSTAND THAT IF I AM INJURED IN THE COURSE OF MY VOLUNTEER TIME, I AM NOT COVERED BY BEL AIR DOWNTOWN ALLIANCE’S WORKERS’ COMPENSATION PROGRAM. I authorize Bel Air Downtown Alliance to seek emergency medical treatment including x-ray, surgery, hospitalization and medication on my behalf in case of injury, accident or illness to me arising from my involvement as a volunteer. I understand that I will be responsible for medical costs incurred by such accident, illness or injury.
5. I understand that the materials and tools provided by Bel Air Downtown Alliance, Inc. are and remain the property of the Bel Air Downtown Alliance, and I agree to return these tools and any remaining materials to Bel Air Downtown Alliance at the end of my volunteer service. I agree that Bel Air Downtown Alliance, Inc. is not liable for any damage to my property or my dependent’s property resulting from volunteer service for the Bel Air Downtown Alliance, Inc.
6. I understand that after I submit my application, it will be reviewed and my eligibility for volunteer work will be determined. I agree to attend volunteer orientation either at orientation meeting or on site orientation to perform my volunteer service
7. I certify that my answers on this application are true and complete and that I have not knowingly withheld any information that might, if disclosed, affect my application unfavorably. I understand that any misrepresentation or omission of facts on this application could be cause for rejection of this application or dismissal I HAVE CAREFULLY READ THIS AGREEMENT AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY, AND SIGN IT OF MY OWN FREE WILL.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Volunteer Signature

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

If volunteer is under 18 years of age, parent or guardian must read and sign the following:  
This release, its significance, and assumption of risk have been explained to and are understood by the minor.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent or Guardian Signature (If under 18 years of age)

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

\_\_\_\_\_  
Date

\_\_\_\_\_  
Bel Air Downtown Alliance, Inc. Representative Signature