

CHEEKWOOD ADULT VOLUNTEER APPLICATION



PERSONAL INFORMATION

Full Name _____ Email Address _____
Street Address _____ Apartment # _____
City _____ State _____ Zip Code _____
Cell Phone _____ Home Phone _____

DOB _____ The minimum age requirement to volunteer with Cheekwood as an Adult Volunteer is 18.

Are you able to commit to volunteering for a minimum of one year? Yes _____ No _____

Ethnicity (optional): _____ White (European, North Africa, Middle East) _____ Black or African-American _____ Hispanic or Latino _____ Asian _____ American Indian or Alaskan Native _____ Native Hawaiian or Pacific Islander _____ Two or more races/ethnicities _____ Decline to state _____

EMERGENCY CONTACTS

Name _____ Relationship _____
Cell Number _____ Other: (home/office) _____

Name _____ Relationship _____
Cell Number _____ Other: (home/office) _____

CURRENT EMPLOYMENT STATUS (optional)

____ Full-time ____ Part-time ____ Retired ____ Other _____

If you are employed, please list your current employer and job title:

EDUCATION (optional)

Highest level of education reached (high school, college, advanced degree):

_____ Name of school _____

Are you currently a student? ____ Yes ____ No If yes, school name _____

What was/is your major area of study? _____

AREAS OF INTEREST

____ Education	____ Gardening	____ Camp
____ Special Events	____ Visitor Services/Greeter	____ Museum
____ Admin Tasks	____ Arts/Crafts	____ Outreach
____ Graphic Design	____ Photography	____ Special Projects
____ Conservation	____ School Programs	____ Docen

1. Why are you interested in volunteering at Cheekwood?

2. Do you have any prior volunteer experience? If yes, please describe organizations and experiences:

3. Do you have any special talents or certifications that would be helpful as a volunteer? For example, sewing, construction, design, handicrafts, musician, CPR, teaching. etc.

4. Have you been employed at Cheekwood before? ____ Yes

Position/dates: _____

VOLUNTEER WAIVER and AGREEMENT

I agree that I will provide proof of being fully vaccinated for COVID, will bring a mask to wear when indoors, observe social distancing and follow Cheekwood's COVID protocols.

This Waiver Agreement, made and entered by and between Cheekwood Estate & Gardens, 1200 Forrest Park Dr, Nashville, TN 37205, herein referred to as "Cheekwood" AND

Name (please print) _____

I understand that I am volunteering for activities with Cheekwood. I understand that as a volunteer, I may be involved in physical activities that have a potential risk of injury. I assume this risk. I agree that I will perform activities that I am comfortable doing and follow all instructions.

Through this Waiver Agreement, the Volunteer does hereby knowingly release and discharge Cheekwood, its officers, directors, employees, agents and volunteers from any claim, demand or cause of action that may be asserted by or on behalf of me as a result of my volunteering for Cheekwood. I agree to be responsible for my behavior and to indemnify and hold harmless Cheekwood its officers, directors, employees, agents and volunteers from any damages or liabilities arising out of my activities as a volunteer for Cheekwood.

I authorize Cheekwood to use my name and photograph for education, public relations and marketing purposes related to Cheekwood.

Volunteers must abide by the code of conduct, policies and rules set out in the program handbook.

I certify that all of the above information is correct. I understand that acceptance as a volunteer is based on a combination of my skills and interests and the needs of Cheekwood. I realize that opportunities may not be available at any given time, but my application will be held on file for one year.

Signature _____ Date _____

BACKGROUND CHECK AUTHORIZATION

I authorize Cheekwood to obtain background information about me.

Print Name _____

First – Middle - Last – Maiden Name (If applicable) _____

Current Address _____

Street City State/Zip _____

Previous Address _____

Street City State/Zip _____

Date of Birth _____

Telephone Number _____

Gender: ___ Male ___ Female ___

Signature _____ Date _____

Submit application by email to volunteers@cheekwood.org or mail to Cheekwood Estate & Gardens, Attn: Volunteer Manager, 1200 Forrest Park Dr., Nashville, TN 37205

_____ *For office use only* _____

_____ Check completed