



CHEEKWOOD GROUP VOLUNTEERING APPLICATION

Group/Organization Name

Group Coordinator Name: _____

Email _____

Mailing Address

Office/Cell phone _____

On Site Project Coordinator: Name _____

Cell Phone _____ Email: _____

Requested Date(s) of Service _____

____ Weekdays ____ Weekends? ____ Either

____ Morning ____ Afternoon

Total Number of Expected Volunteer Participants _____

Number of Participants by Age: 18 and older _____, 16 to 17* _____

*Cheekwood requires a 1:10 ratio of adult to student/youth age 16 to 17.

We would like to explore onsite catering options for our volunteers. ____ Yes ____ No

We will need to book a meeting room ____ Yes ____ No

We will bring our own lunch to enjoy at Cheekwood. ____ Yes ____ No

We will not be onsite for lunch, taking lunch offsite before or following the project. _____

DESIRED INTENT OF SERVICE ACTIVITY (Please check all that apply):

____ Educational ____ Service Learning ____ Team Building ____ Community Support

____ Gardening/Conservation Initiatives Other: _____

How did you hear of this volunteer opportunity?

To the best of your knowledge, do any of the members in your group have any medical and/or physical limitations we should be aware of? If yes, please specify.

NOTE: It is the responsibility of the Group Coordinator to obtain a list of emergency contact information for each.

AVAILABLE OPPORTUNITIES (Please check any that apply):

Special Events: Art Hop Bloom El Dia Harvest/Fall Events
 Holiday Lights
 Gardening/Conservation Projects Construction/Maintenance
 Art projects Special Event Preparation Other (please explain)

GROUP VOLUNTEER POLICY

Cheekwood is a family-friendly place. Conduct and attire must be appropriate for the environment.

While volunteering at Cheekwood, we ask that you respect and adhere to the following:

- Come prepared. Every effort is made to communicate directions, project descriptions, appropriate attire for the service project and contact information.
- Volunteers are not allowed to bring individual not associated with the group project (children, extra family, and friends). General Admission tickets may be purchased at Visitor Services.
- A predetermined Group Coordinator is responsible for the safety and wellbeing of the group members while at Cheekwood.
The Group Coordinator will:
 1. Provide coordination and supervision for the group while volunteering.
 2. Ensure that all members adhere to Cheekwood rules and procedures.
 3. Obtain a signed parental consent form for the group members under the age of 18, which must be turned in to the Volunteer & Community Engagement Manager on or before the first date of service.
 4. Hold emergency contact information for each participant, which must be on file with the Group Coordinator while at Cheekwood.
 5. Call ahead if you are not able to make your volunteer shift or will be late. 615-353-6966.
 6. Ensure volunteers are punctual, conscientious and courteous. Please arrive at your assigned time, dressed appropriately, and ready to work.
- Cheekwood is a smoke free environment.
- Volunteers must not touch or remove any garden materials (plants, displays or tools).
- Cheekwood reserves the right to reject a volunteer for any reason which Cheekwood, in its sole judgment, determines will or may affect the best interests of Cheekwood.
Cheekwood reserves the right to withhold the reason(s) for such refusal.

Cheekwood cannot guarantee a group service opportunity. Cheekwood will make every effort to match volunteer group applicants to volunteer opportunities based on the needs of the Cheekwood and the interests and abilities of the volunteer group.

VOLUNTEER WAIVER and AGREEMENT



I agree that we will follow Cheekwood's COVID policy, and observe social distancing.

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

Name _____ representing Organization _____

We understand that we are volunteering for activities with Cheekwood. We understand that volunteers may be involved in physical activities that have a potential risk of injury. We assume this risk. We agree that we will perform activities that we are comfortable doing and follow all instructions.

Through this Waiver Agreement, the Volunteer and Organization 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 volunteers with our organization as a result of volunteering for Cheekwood. We agree to be responsible for behavior and to indemnify and hold harmless Cheekwood its officers, directors, employees, agents and volunteers from any damages or liabilities arising out of our activities as a volunteers for 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 realize that opportunities may not be available at any given time, but my application will be held on file for one year.

Organization Representation Name (please print) _____

Signature _____ Date _____

_____ *For office use only* _____

_____ Project _____ Date approved _____ Completed