

**CHEEKWOOD FAMILY TEAM VOLUNTEER APPLICATION**



**ADULT - PERSONAL INFORMATION**

Full Name \_\_\_\_\_ Email Address \_\_\_\_\_

Street Address \_\_\_\_\_ Apartment # \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Cell Phone \_\_\_\_\_ Home/Office Phone \_\_\_\_\_

Relationship to child or person \_\_\_\_\_

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

Are you both 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 \_\_\_

**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? \_\_\_\_\_

**YOUTH/OTHER INDIVIDUAL - INFORMATION**

Name \_\_\_\_\_ Email \_\_\_\_\_

Street Address (or same as above) \_\_\_\_\_ Apartment # \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Cell Phone \_\_\_\_\_ DOB \_\_\_\_\_ The age requirement for the other team member is age 10-17.

School \_\_\_\_\_ Grade \_\_\_\_\_

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** — *At least one contact other than Adult applicant*

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Cell Number \_\_\_\_\_ Other: (home/office) \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Cell Number \_\_\_\_\_ Other: (home/office) \_\_\_\_\_

**AREAS OF INTEREST**

Education

Special Events

Admin Tasks

Graphic Design

Conservation

Gardening

Visitor Services/Greeter

Arts/Crafts

Photography

School Programs

Camp

Museum

Outreach

Special Projects

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 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

Names (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/Adult \_\_\_\_\_ Date \_\_\_\_\_

Signature/Youth-Other Person \_\_\_\_\_ Date \_\_\_\_\_

BACKGROUND CHECK AUTHORIZATION - ADULT

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](mailto: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 \_\_\_\_\_