



# Volunteer Registration

805 N US Highway 1  
Jupiter, FL 33477

Phone: (561) 743-7123  
Email: Education@Loxahatcheeriver.org

\*\*\* Volunteers must be 14 years of age or older. \*\*\*

If your community service hours are court ordered you MUST speak with River Center staff upon completion of this form.

Last Name:		First Name:		Completion Date:	
_____		_____		/ /	
Phone #:		Email:		Date of Birth:	
_____		_____		/ /	
Address:					
_____					
Street		City		State Zip	

Emergency Contact 1:		Phone #:		Relationship:	
_____		_____		_____	
Emergency Contact 2:		Phone #:		Relationship:	
_____		_____		_____	
Please list any medical conditions, allergies, etc that the River Center staff should be aware of:					
_____					
_____					

Availability: Please circle all that apply.					T-Shirt Size:	
Tuesday	Wednesday	Thursday	Friday	Saturday	S M L	
A.M. P.M.	A.M. P.M.	A.M. P.M.	A.M. P.M.	A.M. P.M.	XL XXL	
Volunteer shifts are 3 hours long and available in the morning (9 a.m. to 12 p.m.) and afternoon (1 p.m. to 4 p.m.). Please see staff if you are unable to fit this schedule.					Volunteers must wear a River Center shirt.	

I understand that there are inherent risks involved in volunteering for the River Center and working with wild animals. I agree to accept all risks of injury and/or death that may be obtained while volunteering at the center and agree to hold harmless and release from liability the River Center, Friends of the Loxahatchee River, the Loxahatchee River District and their directors, officers, employees, and other volunteers in the event of injury, loss of life, theft, vandalism, or loss of personal property. I give permission for the River Center to use my photo in any publications and promotional materials.

Printed Name:		Signature:		Date:	
_____		_____		/ /	
Parent Name:		Signature:		Date:	
_____		_____		/ /	

## Parent Consent

My child has permission to ride offsite in vehicles driven by River Center staff.	_____	Yes		_____	No
My child has permission to ride offsite with other River Center volunteers.	_____	Yes		_____	No
My child has permission to use computer programs with permission from RC staff.	_____	Yes		_____	No
My child has permission to use the internet with permission from RC staff.	_____	Yes		_____	No

Please initial the appropriate box for each statement.

## Photo Release

**PHOTOGRAPH RELEASE FORM** - By signing the photographic release below, you are agreeing to allow photographs of yourself, and minors accompanying you, to be used by the Friends of the Loxahatchee River (Friends), the Loxahatchee River District (LRD), and the River Center. If your picture has been taken in reference to a particular program, your name will be used in connection with the photograph(s) and may be associated with your name/your company's name/your organization's name.

**I GIVE MY PERMISSION**, without restriction, for consideration received, for the above mentioned agencies (Friends, LRD, River Center) to take, reproduce and publish, in all media including electronic formats known or unknown, photographs of me, or to have this done on its behalf. I understand that these photographs may be used, in whole or in part, in informational, educational or commercial publications of any kind (including without limitation, electronic publishing), by the Friends of the Loxahatchee River and its agents.

### **I UNDERSTAND AND AGREE THAT:**

1. I will not have any right to inspect the finished work or product or to approve its use.
2. Ownership of the originals and all copies belongs to Friends and its agents. This includes all rights to use, not use, or dispose of the photographs, in any manner whatsoever.
3. The agreements in this Release are legally binding and cannot be changed by me or someone who has been given my rights.

### **FOR MINORS:**

Child's Printed Name: \_\_\_\_\_

Parent/Guardian Printed Name: \_\_\_\_\_ Signature: \_\_\_\_\_

### **FOR ADULTS:**

Printed Name: \_\_\_\_\_ Signature: \_\_\_\_\_

-----  
Name of Person Who Obtained Volunteer Application and Photo Release:

Printed Name: \_\_\_\_\_ Signature: \_\_\_\_\_

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

## VOLUNTEER POLICIES



**Application** – All volunteers shall submit a signed application to the River Center and complete a Volunteer Orientation class prior to starting a volunteer position. Adult volunteers will be required to complete a Level 2 (includes fingerprinting) background check prior to starting to volunteer. The River Center retains the right to terminate a court-ordered volunteer at any time for any reason.

**Volunteer Status** – All volunteers are considered at-will volunteers. All volunteer hours performed are unpaid, with no exceptions. The District expressly reserves the right to discharge any volunteers for any reason, with or without cause, and without notice. Nothing in this policy confers the right to any volunteer to continue with this program for any particular length of time. Participation in this program does not constitute employee status for any volunteer.

**Shifts** - Volunteers shall sign up for shifts over the phone or in person at least two days in advance. Shifts are Morning (9 a.m. - 12 p.m.) or Afternoon (1 p.m. - 4 p.m.). Only 4 volunteers may sign up per shift. Volunteers may sign up with a staff member on Volunteer Spot ([www.volunteerspot.com](http://www.volunteerspot.com)).

**Transportation** - Volunteers shall be picked up and dropped off within 15 minutes of their scheduled arrival/departure time. Volunteers shall have documented parent consent when obtaining rides with another volunteer. Please call (561) 743-7123 if you or a parent are running late.

**Arrival / Departure** - Volunteers should notify a staff member when arriving or departing for a shift. Upon departure volunteers shall sign in / out of the Volunteer Log on the front desk computer. Volunteers are solely responsible for logging the numbers of hours volunteered at the River Center. If service hours are required for school, the volunteer is responsible for filing out the form for staff signature.

**Special Events** - Volunteer participation in special events is left to the discretion of the River Center staff and will be based on such factors as the volunteer's experience, overall attitude, attendance, adherence to volunteer policies, etc.

**Behavior** - Volunteers shall be courteous and respectful to River Center visitors, staff, interns, and other volunteers at all times. This includes following instructions given by shift leaders and completing tasks correctly the first time. Conflicts between staff and volunteers or among volunteers should be brought to the attention of the manager for resolution. If a volunteer violates the behavior policy, they will be terminated.

**Dress Code** - Volunteers shall wear a River Center t-shirt while on shift unless otherwise notified by staff. Shirts may be purchased in the River Center gift shop. Shorts shall be of an appropriate length and fit (inseam minimum length 7 inches), gentlemen no shorts lower than your hips) and skirts are not allowed. Volunteers shall wear closed toe shoes (no sandals or flip flops) for safety. Volunteers may assist with outdoor programs at the River Center but shall wear an appropriate swimsuit (board shorts for men and modest suits for women – no string bikinis), cover up or t-shirt (no offensive graphics or language), and water shoes. Volunteers assisting with outdoor programs should bring a change of clothes.

**School Community Service** – Middle or High School. Please bring in any paperwork from your school showing the need for Community Service along with a signed application to the River Center. Each volunteer

must complete a Volunteer Orientation class prior to starting a volunteer position. The River Center is not required to provide hours nor able to prioritize an individual's schedule based on external deadlines. The River Center retains the right to terminate a volunteer at any time for any reason.

**Court Ordered Community Service** – Our volunteers are in direct contact with all of our visitors, including children and the elderly, and underage volunteers. To promote the safety of all of our volunteers and staff, as well as the children and elderly that visit the River Center, volunteers seeking court ordered community service hours for convictions including, but not limited to, violence, firearms or weapons violations, drugs, or felony theft will not be accepted. Acceptance of any other charges will be decided on a case by case basis and are at the sole discretion of River Center staff. All volunteers shall submit a signed application to the River Center and complete a Volunteer Orientation class prior to starting a volunteer position. Charges and conviction shall be disclosed at the time of application and a copy of the court order shall be provided. Prior to the start of a volunteer position, the volunteer shall notify staff how many hours are required and the due date for the hours to be completed. River Center is not required to provide hours for court ordered community service. Furthermore, the River Center is under no obligation to prioritize a volunteer based on external deadlines (e.g., Court ordered community service deadline).

\*\* Adult volunteers will be required to complete a Level 2 (including fingerprinting) background check prior to performing any duties.

The River Center retains the right to terminate a volunteer at any time for any reason.

I have read the volunteer policies and agree to adhere to them in full. I understand and consent to the consequences of failure to follow the policies, up to and including my or my child's dismissal from the River Center's volunteer program.

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

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

Parent / Guardian Signature \_\_\_\_\_

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

*The River Center is a program of the Loxahatchee River District and the Friends of the Loxahatchee River.*

## Loxahatchee River District Liability Release

WHEREAS, \_\_\_\_\_ (herein "PARTICIPANT") has voluntarily requested, from the Loxahatchee River District (herein "DISTRICT"), to participate in the following described activities:

\_\_\_\_\_ and

the aforementioned activities shall commence on \_\_\_/\_\_\_/20\_\_\_, and end on \_\_\_/\_\_\_/20\_\_\_.

This release shall extend to all activities including, but not limited to those which may involve DISTRICT personnel, and/or the use of DISTRICT transportation (motor vehicles, watercraft, or other transportation), equipment, buildings, structures, walkways, and other equipment (owned, leased, or rented by District, Participant, contractors and/or third parties) and/or the use of bodies of water, property (real or personal), and surrounding rights of way owned or occupied by the DISTRICT; and

WHEREAS, the DISTRICT is willing to involve DISTRICT personnel and/or allow use of its transportation (motor vehicles, watercraft, or other transportation), equipment, buildings, structures, walkways and other equipment (owned, leased, or rented by District, Participant, contractors and/or other third parties) and/or the use of bodies of water, property, (real or personal), and surrounding rights of way owned or occupied by the DISTRICT, to facilitate the above identified activities upon the representations and conditions that PARTICIPANT agrees to abide by all safety procedures, agrees to obey all directions and demands of DISTRICT personnel, if any, and PARTICIPANT specifically acknowledges and assumes any and all risks associated with or arising in connection with the above identified activities;

NOW THEREFORE, in consideration of the premises set forth above, I hereby release and agree to indemnify and hold harmless the DISTRICT (including, but not limited to its Governing Board members, employees, agents, attorneys, legal representatives, and their successors and assigns) from any and all liabilities, personal injuries, property damage, claims, damages, attorneys fees, costs, judgments, claims bills, at. al. (under the laws of the State of Florida and/or any other State of the United States of America and/or the Government of the United States of America): (a) by, for, or on behalf of the PARTICIPANT (individually, jointly, derivatively or otherwise) attributable, in whole or in part, to the acts, omissions, or negligence of the PARTICIPANT, District or any third person that arises out of, or related to the above referenced activities; and/or (b) by, for, or on behalf of any third party arising out of, regarding, or related to, in whole or in part, the PARTICIPANT'S acts, omissions, or negligence, attributable, in whole or in part, to the acts, omissions, or negligence of the PARTICIPANT, DISTRICT, or any third person that arise out of, or related to the above referenced activities.

If I am signing this Release as a parent or guardian of a minor child, I acknowledge that I make this agreement individually and on behalf of the minor child to induce the DISTRICT to allow the minor child to participate in the above referenced activities.

Signed and attested to this \_\_\_ day of \_\_\_\_\_, 20\_\_\_.

\_\_\_\_\_  
(Signature of Participant) Parent or Guardian of: \_\_\_\_\_

Participant's Address: \_\_\_\_\_

Participant's Phone Numbers: \_\_\_\_\_

EMERGENCY CONTACT Info: \_\_\_\_\_

No matter what activity you participant in, please think carefully about safety, and be cautious!

**FEDERAL BACKGROUND SERVICES REQUEST FORM**

**PHONE NO:** (561) 747-5700  
**CO:** LOXAHATCHEE RIVER DISTRICT  
**CONTACT:** ANNA WILLIAMS  
**FAX NO:** (561) 747-9929

**TO:** FEDERAL BACKGROUND SVC  
**PHONE:** (561) 969-9966  
**FAX:** (561) 969-9988

**LAST NAME:** \_\_\_\_\_ **FIRST NAME:** \_\_\_\_\_ **MIDDLE INITIAL** \_\_\_\_\_

**MAIDEN:** \_\_\_\_\_ **D.O.B.** \_\_\_\_\_ **SOCIAL SEC#** \_\_\_\_\_ **SEX:** \_\_\_\_\_

**INDIVIDUAL OPTIONS**

- |   |   |
|---|---|
| <input type="checkbox"/> FLORIDA CRIMINAL HISTORY FDOC \$10.00  | <input type="checkbox"/> SOCIAL SECURITY VERIFICATION \$5.00<br>ALIEN # _____ DOC TYPE _____                    |
| <input type="checkbox"/> FLORIDA CRIMINAL HISTORY FDLE \$30.00  | <input type="checkbox"/> FLORIDA WORKERS COMP HISTORY \$5.00  |
| <input type="checkbox"/> NON-FL CRIMINAL HISTORY (STATE) _____ \$30+<br>COUNTY, CITY OR ZIPCODE _____ | <input type="checkbox"/> FLORIDA SEXUAL OFFENDER / PREDATOR \$5.00  |
| <input type="checkbox"/> FL DRIVERS LIC. HIST 3 YEARS \$13.00<br>FL DL # _____                        | <input type="checkbox"/> NATIONWIDE & INTERNATIONAL CRIMINAL CHECK<br>Includes sexual predator/offender \$15.00 |
| <input type="checkbox"/> FL DRIVERS LIC. HIST 7 YEARS \$7.00<br>FL DL# _____                          | <input type="checkbox"/> NATIONWIDE SEXUAL OFFENDER \$5.00  |
| <input type="checkbox"/> EDUCATION VERIFICATION \$20.00 PER EACH<br>**CALL FOR VERIFICATION FORM      | <input type="checkbox"/> OUT OF STATE DRIVER LIC. HIST _____ \$15.00<br>NON FL DL# _____                        |
| <input type="checkbox"/> EMPLOYMENT VERIFICATION \$40 EACH  | <input type="checkbox"/> CREDIT HISTORY INDIV. \$15.00<br>PRESTENT ADDRESS _____<br>CITY, STATE, ZIP _____      |
| CONTACT NAME: _____<br>PHONE NUMBER: _____  | <input type="checkbox"/> JOINT CREDIT HISTORY \$30.00<br>SPOUSE NAME _____<br>SPOUSE SOCIAL _____               |
| <input type="checkbox"/> INTERPOL WORLDWIDE CRIMINAL \$10.00  | <input type="checkbox"/> OTHER _____  |
| <input type="checkbox"/> VEHICLE TAG SEARCH _____ \$10.00   |   |

**PACKAGE OPTIONS (PLEASE FILL IN INFORMATION ABOVE)**

<input type="checkbox"/> <b>PACKAGE #1</b> \$10.00 3 YEAR FL DRIVER LICENSE FL WORKERS COMP SOCIAL SECURITY VERIFICATION	<input type="checkbox"/> <b>PACKAGE #12</b> \$30.00 FDOC CRIMINAL HISTORY NATIONWIDE CRIMAL RECORDS FL WORKERS COMP
<input type="checkbox"/> <b>PACKAGE #3</b> \$40.00 FDLE CRIMINAL HISTORY NATIONWIDE CRIMAL RECORDS SOCIAL SECURITY VERIFICATION FL WORKERS COMP	<input type="checkbox"/> <b>PACKAGE #4</b> \$50.00 FDLE CRIMINAL HISTORY NATIONWIDE CRIMAL RECORDS SOCIAL SECURITY VERIFICATION FL WORKERS COMP 7 YEAR FL DRIVER LICENSE

CHECK OFF SEARCHES REQUESTED  
 \*\*\*SIGNATURE REQUIRED TO PROCESS REQUEST\*\*\*

I herby authorize FEDERAL BACKGROUND SERVICES, INC. to perform any and all necessary searches for the above named company.

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