Village Center for the Ar Session:

A Nonprofit Community Fine Arts Center

12 Main Street, New Milford, Ct. | Email: vca@villagecenterarts.com | Web: villagecenterarts.org

## **Volunteer Registration**

How did you hear about VCA?

Today's Date \_\_\_\_\_

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

VOLUNTEER INFORMATION:         Name:	PARENT/GUARDIAN INFORMATION: (If Under 18 Years) Parent : Cell Phone:		
Street Address:            Town:            State:        Zip:	Daytime Ph: E-mail: Parent :		
Home Phone:	Cell Phone:		
Cell Phone: E-Mail: Volunteer Lives with: Parent(s) Sister(s), Brother(s), Significant Other, Spouse	Daytime Ph: E-mail: Emergency Contact: Name: Relationship:		
(check all that apply) SChOOI (if applicable): Allergies and Health Issues: Use back if needed	Phone: Phone:		

In the event of an emergency and I cannot be reached, I hereby give my permission for the Village Center Instructor or their staff to obtain treatment for my child. I hereby authorize any health care provider to rely on this consent for treatment for my child. I give permission for treatment provided by EMTs and by staff trained in first aid. I give permission and understand that Village Instructors, their staff, or emergency services will provide transportation to New Milford Hospital. I agree to hold harmless, the Village Center for the Arts, LLC, its agents, employees and independently contracted instructors, against and from all liabilities, claims, costs, charges, and the like, due to any injury to my child, ad/or treatment artising from my child's participation.

SIGNED

Volunteer Signature or, if under 18, Parent/Guardian Signature

***Availability***							
Sun.	Mon.	Tues	s. Wed.	Thurs.	Fri.	Sat.	
Village C	enter for the Ar	ts, Inc.	12 Main Street	New Milford,	CT 06776	860-354-4318	
<b>Dyfpt</b>							

villagecenterarts.org

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DATE

How can you help? (pls check as many as you'd		
· · ·		
Assisting at birthday parties, Weeke		
<b>Special Events:</b> Advance Planning, Represent VCA to the public at event _	•	
Special Skills:		
First Aid Certification date: Bat certified, but will become certified ASAP:		date:I am not
Your Hobbies and Interests:		
Please write a statement about why you woul	d like to volunteer at	VCA:
<ul> <li>Who are your friends who already come to Ve</li> <li>I agree, if accepted, to fulfill my commitm</li> <li>I will work all days agreed to and call if I call</li> </ul>	ent to the jobs assign	ed to me at VCA.
<ul> <li>I will accept my assignments with good ch</li> <li>I understand that the jobs I am assigned, r</li> <li>role in the functioning of a working fine art</li> </ul>	neer. no matter how trivial t	
Signature of Volunteer:		Date:
<ul> <li>I agree to the terms expected of my child.</li> <li>As their parent/guardian, I will bring and p considerate of their commitment to VCA.</li> <li>I understand that my child will receive a nu accumulation of volunteer hours.</li> <li>I understand that if my child needs to stay schedule, studio fees appropriate to my cl</li> </ul>	ick up my child at the umber of benefits with <b>for an extended peri</b>	n-in the studio with the od of time beyond their work
Signature of Parent/Guardian:		
I, the undersigned, authorize Village Center for the Arts to record or		

other media, my child's first name, voice, image, artwork, and or performance for informational programs, reports, and promotional materials to be used for non-commercial purposes. I understand that neither my child nor I will receive compensation for this appearance and no private individual will receive compensation of any kind as a result of broadcasting this material.