## Volunteer at Poplar Grove

Poplar Grove is continually recruiting volunteers, 18 and older, who support our mission of promoting the spirit of the Lower Cape Fear Region through conservation, education and preservation.

Volunteers are a valued part of our community, and have the opportunity to set their own schedule during regular hours of operation. We have an active volunteer community, who provide daily, weekly, and monthly assistance. It's a great place to stop by and pitch in for an hour, a morning, or an afternoon.

All potential volunteers must submit a completed application and attend a Volunteer Orientation prior to placement. We also require that all volunteers participate in position-specific training as part of their volunteer experience if working in the stables or as a docent in the manor house.

If you support our mission and are willing to put forth the time to be trained, we encourage you to complete this application. The information submitted on this form will help us find the most satisfying, rewarding, and appropriate place for you.

**VOLUNTEER INFORMATION** 

Name:				
Email:				
Email is preferred method of contact junk e-mail folders if you do not rece				
Address:				
City:	State:		Zip:	
Cell Phone:			_	
PLEASE CHECK ALL THAT APPLY:Stud	dentRetiree	_Veteran	Intern	Artist
HEALTH INFORMATION Please list any *health conditions that aff back, joint, or heart issues, and any allerg	•	vork – incluc	ling any hea	d, neck,
*Please notify and inform a staff person if any proinjections, insulin shots, etc.	otocol is required in case of	of an emergenc	y, such as epi-p	en
EMERGENCY CONTACT INFORMAT	TION			
Name:	Relation	onship:		
Address:				
City:		_State:	Zip:	
Phone Number:				

Briefly state why would you like to volunteer at Poplar Grove?		
MAIN AREA OF INTEREST*StablesFarmers' MarketHouse DocentGift ShopLawn & Gardens BlacksmithingBasketryWeavingSchool ProgramsCarpentryGrounds (irrigation, electrical, etc.) *Stables requires an Addendum Application		
VOLUNTEER AGREEMENT AND RELEASE FROM LIABILITY		
In signing this form, I understand and agree to the following terms and conditions related to volunteering my services at Poplar Grove Foundation Incorporated:		
I,, recognize that, as a volunteer, I represent Poplar Grow Foundation, Inc. to the public. I accept the responsibility for this status and will conduct myse in a professional manner. I will be clean and sober(!) when conducting business as representative of this organization.		
(Initial) I will work to maintain an atmosphere of physical and emotional safety for everyone associated with the organization, including employees, volunteers and visitors (Initial) I agree to maintain the confidentiality of all employees, volunteers, visitors, and donors about whom I have personal and identifying information (Initial) I agree to honor the commitment length and frequency of service that I make to		
the organization. I agree to provide as much advance notice as is possible in the event that I wis be absent from my volunteer shift.  [Initial] I agree to update my personal information and emergency information as		
changes occur.  (Initial) I am aware that as a volunteer I expose myself to potential hazards which include but are not limited to: cuts, burns, allergic reactions, back injury from lifting, car accidents, fall injury from farm animals, etc. Potential hazards have been explained to me. I am voluntaril participating in this service with the knowledge of the potential hazards involved and herbagree to accept any and all risks of injury.		
(Initial) I agree that my assignees, heirs, distributes, guardians and other legarepresentative will not make a claim against or sue for injury or damage resulting from the negligence or other acts, howsoever caused, by any employee, agent, or volunteer contractor of the organization as a result of my participation as a volunteer (Initial) I hereby release Poplar Grove Foundation, Inc., its Board of Director		
management, staff, volunteers, and animals from all actions, claims or demands that I, m assignees, heirs, guardians and legal representatives now have or may hereafter have for injur resulting from my participation as a volunteer.		
I have carefully read this agreement and fully understand its contents. I am aware that this is a release of liability and I sign it of my own free will.		
Volunteer Signature: Date		
Volunteer Printed Name:		