

Volunteer
Community Service
Service Hours
Intern

 **Art and Culture
Center of Hollywood**
1650 Harrison Street
Hollywood, FL 33020
954. 921. 3274
954. 921. 3273 fax
ArtAndCultureCenter.org

Date: ___/___/___

Name: _____

Address: _____

City: _____ State: _____ Zip code: _____

Home Phone: _____ Cell: _____

Email: _____

Age Category:

15 – 21 22 – 35 36 – 54 55 and over

Days and Times Available: M _____ am/_____ pm T _____ am/_____ pm
W _____ am/_____ pm TH _____ am/_____ pm F _____ am/_____ pm
S _____ am/_____ pm SU _____ am/_____ pm

In what areas are you interested in assisting with:

- Theater Department
- Marketing and Public Relations Department
- Education Department
- Exhibitions Department
- Administrative and development Department

Please list skills that you think may be helpful: (i.e. typing, computer (Word, Excel, and Publisher), organizational, arts and crafts, teaching, directing, etc.)

How did you learn about ACCH volunteer opportunities? _____

Reason for volunteering: _____

Have you ever volunteered before? Yes No

If so, where: _____

What did you do? _____

Have you ever been convicted of any criminal offense, pleaded guilty or *nolo contendere*, or found guilty of criminal offense, even though Adjudication was withheld or sentence was suspended?

YES

NO

If yes,
explain

Date: _____ Charge: _____

Place: _____ Current Status: _____

(NOTE: A 'YES' response to this question does not automatically disqualify you.)

**Art and Culture Center of Hollywood
Emergency Contact Information**

In case of emergency, please call:

Name of person _____

Relationship _____

Phone No. ____/____/____ Alternate Phone No. ____/____/____

Alternate contact person _____

Relationship _____

Phone No. ____/____/____ Alternate Phone No. ____/____/____

Liability waiver agreement:

I, _____ am a community service / volunteer with the Art and Culture Center of Hollywood. In consideration of the opportunity afforded me to participate as a community service / volunteer, I do hereby knowingly, freely and voluntarily release, waive and discharge the Art and Culture Center of Hollywood, it's officers, employees, agents and volunteers from any and all liability, losses, expenses, damages, claims, causes of action or judgments including without limitation attorney's fees and court costs which may be sustained by me and/or my family directly or indirectly in connection with, or arising out of, my participation as a community service / volunteer, whether caused in whole or in part by the negligence of the Art and Culture Center of Hollywood. I further agree not to represent myself as an officer, agent, or employee of the Art and Culture Center of Hollywood and acknowledge that I am participating as a community service / volunteer and that I am not entitled to any stipend, or fringe benefit. I acknowledge that the Art and Culture Center of Hollywood will not be responsible or liable for any personal injury or property damage caused in whole or in part by my personal vehicle.

I _____ (initial) have read this Release and Waiver of liability form and fully understand its terms.

Signature: _____ Date: ____/____/____

Parent/Legal Guardian Signature: _____

Office Use:

Contacted Volunteer: _____ Date: _____

Areas for volunteer to assist: _____

Assignments and times contributed to be completed on a separate form