

# Volunteer Application



## Applicant Information

Name \_\_\_\_\_

Street Address \_\_\_\_\_

City ST ZIP Code \_\_\_\_\_

Home Phone \_\_\_\_\_

Work Phone \_\_\_\_\_

E-Mail Address \_\_\_\_\_

Highest Level of Education:  High School  Associate's Degree  Bachelor's Degree  Master's Degree  Other

## Availability

During which hours are you available for volunteer assignments?

Weekday mornings       Weekend mornings  
 Weekday afternoons       Weekend afternoons

Specific day and time if known \_\_\_\_\_

## Interests and Abilities

Please explain your interest in a volunteer position at Waimea Valley:

Please check the areas in which you are interested in volunteering:

- |  |  |
|--|--|
| <input type="checkbox"/> Botanical Gardens         | <input type="checkbox"/> Administrative/Office |
| <input type="checkbox"/> Plant Nursery             | <input type="checkbox"/> Special Events        |
| <input type="checkbox"/> Greeter at Visitor Center | <input type="checkbox"/> Internship            |
| <input type="checkbox"/> Interpreter/Docent        | <input type="checkbox"/> Other:                |
- \_\_\_\_\_

If interested in helping to restore our native forest, please tell us how often you go hiking?

- |   |  |
|---|--|
| <input type="checkbox"/> I have never hiked before                      | <input type="checkbox"/> I go hiking on a regular basis (once a month) |
| <input type="checkbox"/> I go hiking on occasion (a few times per year) | <input type="checkbox"/> Other (please explain)                        |

### Special Skills or Qualifications

Summarize special skills and qualifications you have acquired from employment, previous volunteer work, or through other activities, including hobbies or sports.

### Previous Volunteer Experience

Summarize your previous volunteer experience.

### Person to Notify in Case of Emergency (please use an on island contact)

Name \_\_\_\_\_

Street Address \_\_\_\_\_

City ST ZIP Code \_\_\_\_\_

Home Phone \_\_\_\_\_

Work Phone \_\_\_\_\_

E-Mail Address \_\_\_\_\_

### Agreement and Signature

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as a volunteer, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal.

Name (printed) \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

### Our Policy

It is the policy of this organization to provide equal opportunities without regard to race, color, religion, national origin, gender, sexual preference, age, or disability.

Thank you for completing this application form and for your interest in volunteering with us. Please e-mail the completed forms to [volunteers@waimeavalley.net](mailto:volunteers@waimeavalley.net) or fax to 808-638-7776

# Volunteer Background Check Authorization



I \_\_\_\_\_ authorize the Hi'ipaka, LLC and its agents, assignees, employees or officers to make investigations, reference checks, security checks and other inquiries into my past regarding my Volunteer application.

These queries may include, but are not limited to, questions pertaining to my past employment, criminal, credit, driving and educational history as well as information regarding my general character and reputation.

Further, I authorize any individual, company, business entity, institution, or government agency having relevant information to furnish Hi'ipaka, LLC with that information.

I agree to release and hold harmless the Hi'ipaka, LLC from any and all liability with respect to receipt of such information and acknowledge that Hi'ipaka, LLC is relying on third party information and therefore release Hi'ipaka LLC, its agents, officers, and employees from any and all liability arising out of errors or omissions.

I understand that the information I provide on this form will be used solely by Hi'ipaka, LLC in obtaining background information to determine volunteer eligibility. It will not be used to discriminate or determine eligibility based upon gender, age, race, color, creed, national origin, disability, veteran, marital status or any other category protected by law. *You are not required to report your sex or race and providing that information is strictly voluntary. Not reporting that information may lengthen the time that it takes to process your background check but will not exclude you from volunteer eligibility.*

Name \_\_\_\_\_

(First, Middle Initial, Last Name)

Date of Birth \_\_\_\_\_ Age \_\_\_\_\_ SS# \_\_\_\_\_ Sex M F

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



# WAIMEA VALLEY

HI'IPAKA LLC

## Volunteer Release, Waiver and Consent

Name: \_\_\_\_\_

I wish to participate in volunteer services and activities in Waimea Valley to help promote Hi'ipaka LLC's mission. I understand and agree that my participation in these services and activities will be on a strictly voluntary basis, and that I will not receive any money or other compensation for participating in them. I understand and agree that in acting as a volunteer, I am not an employee, representative or agent of and have no position or other capacity with Hi'ipaka LLC except as a volunteer.

I am in good physical condition and can work self-sufficiently without assistance. Prior to my participation in any volunteer activities in Waimea Valley or for Hi'ipaka LLC, I will inform Hi'ipaka LLC of any mental, physical, emotional and/or medical conditions that may create or increase a risk of harm to myself or others while engaging in any activities proposed herein or assigned to me as a volunteer, including but not limited to lifting, weeding, plant trimming, or painting. I will not undertake any activity that I believe will pose a risk of harm or injury to myself or others. **I understand I should wear proper footwear with good traction, should have clothing suitable for work in rainy, wet, slippery and/or windy conditions as well as hot and/or dry conditions, and should provide my own sun protection and water.** I will be responsible for my own equipment and supplies, if any, and for the safe use and proper care of my or Hi'ipaka LLC's equipment and supplies.

I acknowledge that there are inherent risks and dangers associated with my volunteer activities in Waimea Valley, including, but limited to, the risks of injury, death or loss from the use of tools or equipment, from walking on uneven ground and/or slippery rocks, and from heavy rains and flooding. I hereby assume all risks and dangers in participating in volunteer activities in Waimea Valley, and hereby knowingly waive, release, discharge and agree to hold harmless and indemnify Hi'ipaka LLC, Hi'ilei Aloha LLC, and OHA, and their respective members, managers, Trustees, employees, agents, affiliates, successors and assigns from any and all claims for personal injury, death or property damage of any kind or nature whatsoever arising out of or in the course of my participation in volunteer activities in Waimea Valley and/or for Hi'ipaka LLC.

In addition, I hereby consent to Hi'ipaka LLC, Hi'ilei Aloha LLC, and OHA or persons authorized by any of them to use photographs, videotapes, motion pictures, audio recordings, or any other record of my participation in volunteer activities in Waimea Valley and/or for Hi'ipaka LLC for any lawful purpose, without liability to said entities and persons, and I understand that I will not be entitled to any compensation for the use thereof.

If the volunteer is a minor, I represent to Hi'ipaka that I am the parent or other legal guardian of the minor lawfully authorized to sign this form on behalf of said minor, and that my signature constitutes my agreement, as said minor's parent or legal guardian, to the terms, covenants and representations above on behalf of said minor. I further agree that I shall be solely responsible for the care and supervision of said minor and for said minor's conduct while he or she is in Waimea Valley.

\_\_\_\_\_  
Signature of Volunteer (or Minor's guardian)

\_\_\_\_\_  
Date

Print Volunteer's Name \_\_\_\_\_

minor's Name(s) and Age(s) \_\_\_\_\_