



Full Circle Thrift

2245 Lake Avenue
Altadena, CA 91001
626-639-3051

Volunteer Application Form

Volunteer Name: _____ Today's

Date: _____

Home Address:

Phone: _____ Email: _____

Is the Volunteer over 18 years of age? Y N

If No, parent or legal guardian's name: _____

Phone: _____ Email: _____

Emergency Contact Name: _____ Phone: _____

Relationship to Volunteer: _____

Personal or Work References - Please include name, address, telephone number, and relationship to you. Please do not include family members.

- 1) _____

- 2) _____

What skills, hobbies, or interest do you bring to the Thrift Store?

Preferred Position in the Thrift Store (circle one): Retail Area Sorting/Pricing Area

How familiar are you with the mission and work of Full Circle Thrift Store?

Quite Familiar

Somewhat Familiar

Not Familiar

All Full Circle Thrift Store, volunteers need to be familiar and supportive of FCT's Mission Statement:

The store is founded on the rich Mennonite tradition of historic peace churches whose mission centers around RECONCILIATION. We advocate for PEACEMAKING in all circumstances. We strive to LOVE our neighbor and our enemy, and we reject all forms of violence. We work to promote social, economic and environmental JUSTICE for all. We stand with the marginalized, and engage local communities to effect change.

I have read, understood, and can support the mission of Full Circle Thrift Store:

Signature: _____ Date: _____

Print Name: _____

If participant is under 18 years of age a parent or legal guardian's signature is required:

Signature _____ Date: _____

Print Name: _____

Relationship to volunteer: _____

VOLUNTEERS MUST COMPLETE THE WAIVER AND RELEASE FORM
PARENT/LEGAL GUARDIAN SIGNATURE IS REQUIRED IF VOLUNTEER IS UNDER AGE 18

WAIVER AND RELEASE FORM

RELEASE OF LIABILITY

In return for being allowed to participate in Full Circle Thrift (FCT) volunteer activities and all related activities, including any activities incidental to such participation ("Volunteer Activities"), the undersigned Volunteer or Parent/Legal Guardian of Volunteer if Volunteer is under age 18 (hereafter referred to using "I", "me", or "my") releases and agrees not to sue FCT or its officers, directors, employees, sub-contractors, sponsors, agents and affiliates from all present and future claims that may be made by me, my family, estate, heirs, or assigns for property damage, personal injury, or wrongful death arising as a result of my participation in the Volunteer Activities wherever, whenever, or however the same may occur.

I understand and agree that FCT is not responsible for any injury or property damage arising out of the Volunteer Activities, even if caused by their ordinary negligence or otherwise.

I understand that participation in the Volunteer Activities involves certain risks, including, but not limited to, serious injury and death. I am voluntarily participating in the Volunteer Activities with knowledge of the danger involved and I agree to accept all risks of participation.

I also agree to indemnify and hold harmless FCT for all claims arising out of my participation in the Volunteer Activities.

I understand that this document is intended to be as broad and inclusive as permitted by the laws of the state in which the Volunteer Activities take place and agree that if any portion of this Agreement is invalid, the remainder will continue in full legal force and effect.

I also acknowledge that FCT has not arranged and do not carry any insurance of any kind for my benefit or that of Volunteer (if Volunteer is under 18), my parents, guardians, trustees, heirs, executors, administrators,

successors and assigns. I represent that, to my knowledge, I am in good health and suffer no physical impairment that would or should prevent my participation in Volunteer Activities.

I also understand that this document is a contract which grants certain rights to and eliminates the liability of FCT.

(Signature of Volunteer)

Date

I am of legal age and am freely signing this agreement. I have read this form and understand that by signing this form, I am giving up legal rights and remedies.

(Signature of Parent/Legal Guardian if Volunteer is Under 18)

Date

I am the parent or legal guardian of the Volunteer. I am of legal age and am freely signing this agreement. I have read this form and understand that by signing this form, I am giving up legal rights and remedies.

PUBLICITY RELEASE

In return for being allowed to participate in Full Circle Thrift (FCT) volunteer activities and all related activities, including any activities incidental to such participation ("Volunteer Activities"), the undersigned Volunteer or Parent/Legal Guardian of Volunteer if Volunteer is under age 18 (hereafter referred to using "I", "me", or "my") hereby grants to FCT, and each of its subsidiaries, affiliates, agents, advertising or promotional agencies, and partners, and all such entities' officers, directors, agents, employees, respective successors and assigns (collectively, "Authorized Parties"), the absolute and irrevocable right and permission to use, publish, broadcast and/or copyright the use of Volunteer's name, address, voice, photograph and/or likeness, caricature, and personal information, in its current form or as retouched, digitized, cropped, altered, distorted or modified in any way, in any and all advertising, promotional, or other materials based upon or derived from the Volunteer Activities in any manner, in any media whatsoever for any and all purposes, including by way of example but without limitation advertising, promoting or publicizing products and services throughout the universe, in perpetuity, in any and all media now known or hereafter devised (including without limitation on the Internet), without additional compensation. I further agree that anything derived there from will be owned solely by the Authorized Parties. I shall not authorize the use of any print, negative or other copy thereof by anyone other than the Authorized Parties.

I understand that this document is intended to be as broad and inclusive as permitted by the laws of the state in which the Volunteer Activities take place and agree that if any portion of this Agreement is invalid, the remainder will continue in full legal force and effect.

(Signature of Volunteer)

Date

I am of legal age and am freely signing this agreement. I have read this form and understand that by signing this form, I am giving up legal rights and remedies.

(Signature of Parent/Legal Guardian if Volunteer is Under 18)

Date

I am the parent or legal guardian of the Volunteer. I am of legal age and am freely signing this agreement. I have read this form and understand that by signing this form, I am giving up legal rights and remedies.