



THE GARDENS AT ELM BANK
MASSACHUSETTS HORTICULTURAL SOCIETY

Volunteer Application Form 2020

VOLUNTEER CONTACT INFORMATION: - Please print clearly

Volunteer Name: _____ Phone Number: _____
Address: _____ City: _____
State: _____ Zip Code: _____ Email Address: _____

Check here if Volunteer is under age 18 ____ If a minor, how old is Volunteer? ____
Parent or Legal Guardian Name and Email (required): _____

EMERGENCY CONTACT:

Name: _____
Phone Number: _____ Relationship: _____

OTHER INFORMATION:

1. Do you have any allergies or medical conditions that we should be aware of?

2. Why do you want to volunteer your time at Mass Hort?

3. Please list any skills, experience or training you have that you feel may benefit Mass Hort:

4. What volunteer opportunities interest you?

____ Horticulture/Garden maintenance
____ Events – Including Festival of Trees etc.
____ Children's Education
____ Educational Programs

____ Administrative/Office help
____ Garden Tour guide
____ Visitor Center/Information
____ Library

5. Are you a member of Mass Hort? Yes ____ No ____

AVAILABILITY:

Daytime ____ Evening ____ Weekdays ____ Weekends ____

Or please note date range/event: _____

How many hours per week can you donate? _____

May we call you for last minute openings? Yes ____ No ____

PHOTOGRAPHS: Volunteers may be photographed or videoed while on duty as a volunteer. These photos/videos may be used in brochures, displays, advertisements, website, social media or press releases. Mass Hort reserves the right to photograph adults over the age of 18 for these purposes only. Images of volunteers under the age of 18 may only be used with parental permission. If you do not wish for your photograph to be used to promote the organization, please contact the Volunteer Engagement Manager.

**ALL VOLUNTEERS MUST COMPLETE A
WAIVER AND RELEASE FORM**

WAIVER AND RELEASE OF LIABILITY FORM

In return for being allowed to participate in Massachusetts Horticultural Society 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** the Massachusetts Horticultural Society or its current and former officers, directors, employees, sub-contractors, sponsors, agents and affiliates ("the Society") **from any and all present and future claims, actions, expenses, and demands** that may be made by me, my family, estate, heirs, or assigns for **any and all property damage, personal injury, or wrongful death arising from or related to my, or my child's, participation in the Volunteer Activities** wherever, whenever, or however the same may occur.

I understand and agree that the Society is not responsible for any injury, illness, or property damage arising out of the Volunteer Activities, even if caused by the Society's own negligence, carelessness or otherwise. I also agree to indemnify and hold harmless the Society for all claims, actions, expenses and demands arising out of my, or my child's, participation in the Volunteer Activities.

The Society has taken, and will continue to take, necessary steps to protect staff, volunteers, and guests. Nevertheless, risks are inherent in the Volunteer Activities. By signing below, and in addition to the terms set forth above, I certify that:

- a. I understand that participation in the Volunteer Activities involves certain risks, including, but not limited to, illness, serious injury and death.
- b. I am, or my child is, voluntarily participating in the Volunteer Activities with knowledge of the danger involved and **I agree to accept all risks of participation. I assume full responsibility for any and all risks that may arise from my, or my child's, presence at Society's program sites or participation in the Volunteer Activities.** These include risks arising from physical exertion, lifting heavy objects, conditions at facilities, using tools, traveling to or from a program site, or interacting with students, other volunteers, or others.
- c. I agree, for my own safety and that of others, that I and/or my child will comply with Society's volunteer policies, safety rules, and other directions, and that if applicable I will supervise any child or other person for whom I am responsible.
- d. I acknowledge that the Society has not arranged and does not carry any insurance of any kind for my benefit or that of the Volunteer (if the Volunteer is under 18), my parents, guardians, trustees, heirs, executors, administrators, successors and assigns. I represent that, to my knowledge, I am, or my child is, in good health and suffer no physical impairment that would or should prevent my, or my child's, participation in Volunteer Activities.
- e. Regarding COVID-19:
 - i. I understand and acknowledge that the Commonwealth of Massachusetts has experienced community spread of the COVID-19 virus, which if contracted by myself or my child could be fatal. I understand that the COVID-19 outbreak is a global pandemic which the Society cannot control.
 - ii. I understand that during my, or my child's, participation in the Volunteer Activities, I or my child may be exposed to the COVID-19 virus or may risk such exposure, which risk cannot be eliminated. These hazards and risks include, but are not limited to, the dangers of serious illness and death.
 - iii. I will follow any city, state and federal guidelines, including CDC guidance, for preventing the spread of COVID-19. Currently, these guidelines include (but are not limited to) maintaining appropriate social distance of 6 feet at all times, washing hands frequently for at least 20 seconds, disinfecting frequently touched surfaces, and wearing a face mask or face covering when appropriate.
 - iv. I acknowledge that the Society does not have water stations available for its Volunteers at this time, and I, or my child, will bring appropriate supplies including hand-sanitizer.
 - v. I affirm that, to the best of my knowledge, everyone in my home is Covid-19 symptom-free, with no known exposure to COVID19. In addition, if I or my child experience any symptoms of illness or have been around others that are ill, I or my child will refrain from volunteering for the time period recommended by the CDC or other applicable authorities for self-quarantine and/or as instructed by the Society.
 - vi. In the event that I, or my child, contract COVID-19, I hereby grant authority to the Society to do contact tracing and will work with the Society toward that end so as to notify third parties that they may have been exposed to the virus.

- f. If I do not agree to these terms, I understand that I am not allowed to participate in the Society's volunteer program. **Further, I understand that failure to abide by these terms will result in removal from the Volunteer program.**

I certify that I have read this document, and I understand that it is a RELEASE OF LIABILITY and is intended to be as broad and inclusive as permitted by the laws of the Commonwealth of Massachusetts in which the Volunteer Activities take place. I agree that if any portion of this Agreement is invalid, the remainder will continue in full legal force and effect. I also understand that this document is a contract which grants certain rights to and eliminates the liability of the Society.

(Signature of Volunteer)

Date

I am of legal age and am freely signing this agreement. I have read this Waiver and Release of Liability and understand that by signing it 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 Waiver and Release of Liability and understand that by signing it I am giving up legal rights and remedies.

PHOTOGRAPH AND IMAGE RELEASE FOR MINORS

I give permission to Massachusetts Horticultural Society to use my child/ward's photograph and image for publicity and promotional purposes (website, pamphlets, brochures, social media, videos, etc.) related to Massachusetts Horticultural Society/The Gardens at Elm Bank. I release Massachusetts Horticultural Society from all claims and liability related to those photographs or images.

(Signature of Parent/Legal Guardian)

Date

Signed forms must be mailed/emailed in advance of volunteer participation to:

Holly Perry, Event Volunteer Coordinator
Massachusetts Horticultural Society
900 Washington Street, Wellesley, MA 02482
<mailto:education@masshort.org>



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