



THE GARDENS AT ELM BANK  
MASSACHUSETTS HORTICULTURAL SOCIETY

# Volunteer Application Form

## 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  
\_\_\_\_ Children's Education  
\_\_\_\_ Educational Programs

\_\_\_\_ Administrative/Office help  
\_\_\_\_ 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 BELOW**

**WAIVER AND RELEASE FORM  
RELEASE OF LIABILITY**

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 officers, directors, employees, sub-contractors, sponsors, agents and affiliates ("the Society") 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 the Society 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 also agree to indemnify and hold harmless the Society for all claims arising out of my participation in the Volunteer Activities.

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 acknowledge that the Society has not arranged and does 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 understand that this document 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 and 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

\_\_\_\_\_  
**(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.

**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 may be submitted to Mass Hort staff on the day of volunteer event  
OR mailed/emailed in advance of volunteer participation to:**

Julie Griffin, Volunteer Engagement Manager  
Massachusetts Horticultural Society  
900 Washington Street, Wellesley, MA 02482  
[jgriffin@masshort.org](mailto:jgriffin@masshort.org)