

STUDENT VOLUNTEER PARENTAL RELEASE

My son/daughter has my permission to serve as a National Science Center's Fort Discovery volunteer. I understand that transportation is my responsibility and that I will be notified of any problems involving his/her volunteer service.

This is also my authorization for National Science Center's Fort Discovery to obtain necessary and/or surgical treatment in the case of illness, accident, or any emergency situation that may arise, and I am unable to be reached at the time of such an emergency. The medical services are to be performed by any medical doctor at the nearest hospital.

I further state that I will not hold NSC's Fort Discovery liable for such medical and/or surgical treatment in such cases of illness, accident or any emergency situation.

My child's name: _____

Parent name: _____ Home phone: _____

Parent's place of employment: _____ Work phone: _____

Name of insurance company: _____

Policy number: _____

Family physician: _____

Physician's phone number: _____

Alternate contact if parent cannot be reached:

Name: _____ Relationship to volunteer: _____

Alternate contact phone: _____

Signature of parent or guardian: _____

Date: _____





STUDENT VOLUNTEER PROGRAM A P P L I C A T I O N

Please complete and return along with your recommendation and release form to:
P. Tom c/o NSC's Fort Discovery, One 7th St., Augusta, GA 30901
or fax: (706) 821-0269 or tomp@nscdiscovery.org

(Please print)

Name: _____

Street Address: _____

City, State, ZIP: _____ Phone: (____) _____

Email: _____ D.O.B.: _____

School: _____ Grade Level _____

Emergency Contact: _____ Phone _____

Have you ever done any volunteer work? _____ If so, what kind?

Please list any skills, hobbies, special training, or interests that you have (for example: foreign language, photography, musical skills, computer skills, etc.):

How would you describe yourself to someone who doesn't know you?

Why do you want to be a Fort Discovery volunteer?

In what areas are you most interested in volunteering? (Please indicate 1st and 2nd preference)

_____ Summer Camps _____ Greeter _____ Exhibit Explainer
_____ Store Assistant _____ Admin Assistant _____ Roving Demonstrator

How many days per week/month would you like to volunteer? _____

I understand that I must attend an orientation and complete required training before reporting to work as a volunteer. I also understand that I must comply with all necessary rules, including those concerning dress code, to continue as a volunteer. I understand that I am responsible for my own transportation and that I will give notice to Fort Discovery if I am unable to report for my shift.

Applicant's signature _____ **Date** _____

Thank you for your interest in National Science Center's Fort Discovery... "The Smart Place to Have Fun !"