



Service Team Leader Application

Global Youth Service Day is the largest service event in the world! The City of Bloomington Volunteer Network and the Monroe County Youth Council invite young people who are enrolled in an MCCSC high school to be a part of GYSD in Bloomington on April 20, 2012. Participation is limited to 30 Service Team Leaders. **Put your leadership into action! Apply by April 6.**

Office Use Only
School Admin.
Authorization _____

- Date/Time:** Friday, April 20, 2012 – 10:30 a.m.-2:30 p.m.
(schools will release students from class to be transported by bus to The Warehouse)
- Locations:** The Warehouse, 1525 S. Rogers St. and locations along the B-Line Trail
- Projects:** High school students will come together as volunteers to tackle issues from poverty to pollution, all focused on a sustainability theme.
- Volunteers:** Students will be assigned to a service team of 10 students and 1 peer leader. Each team will have a minimum of one adult leader.
- Attire:** Get ready to get dirty! Dress for the weather. Closed toe shoes are a must! Volunteers will be working outside.
- Lunch:** Bring your own lunch. Snacks and drinks will be provided.
- Training:** *Volunteer Leader Training is required for ALL GYSD Service Team Leaders. Training will be on Saturday, April 14, 2012 from 1-2:30 p.m. in City Hall Council Chambers.*
- Questions?** Contact 349-3433 or volunteer@bloomington.in.gov

Registration Instructions

1. Fill out the information below
2. Select your project preferences
3. Select a t-shirt size
4. Sign the waiver form if you are age 18 or older or ask your parent/guardian to sign it.
5. Make sure every box is filled in and return your completed application by Friday, April 6.

1. Contact Information

Name				Age		
School				Date of Birth mm / dd / yyyy	__ / __ / ____	
Group/Title						
Address						
City				State		
				Zip		
Email				Phone		
Emergency Contact				Emergency Phone		
Tell us why you would like to participate:						

2. Project Preference (select top 3 choices by marking with a 1, 2 or 3)

<input type="checkbox"/>	Art/Mural Painting
<input type="checkbox"/>	Graffiti Removal
<input type="checkbox"/>	Natural Area Beautification
<input type="checkbox"/>	Garden Project
<input type="checkbox"/>	Invasive Plant Management

<input type="checkbox"/>	Rain Barrel Assembly
<input type="checkbox"/>	Habitat Shed Construction
<input type="checkbox"/>	Bloomington Bicycle Project
<input type="checkbox"/>	Indoor Project (e.g. Food Drive or Meal Prep)
<input type="checkbox"/>	Documentary Team (e.g. photographers)

3. T-Shirt Size (circle one)

T-Shirt Size	XS / S / M / L / XL / XXL / XXXL
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4. Liability Waiver

I acknowledge that my participation is completely voluntary on my part and is being undertaken without promise or expectation of compensation. I hereby release and discharge the City of Bloomington, Indiana, its affiliates, associates, and agents and any participating organizations, for any claims for damages or injury I may incur resulting from my participation in this voluntary community service event. I understand that my participation involves risk of injury and that illness may result directly or indirectly from my participation. I further state that I am in proper condition for participating in these events.

PHOTO RELEASE

I give my permission to the City of Bloomington, Indiana, to reproduce any photographs or video taken during this project. I understand that this material may be used in various publications, recruitment materials or for other related endeavors. This material may also appear on the City of Bloomington, Indiana websites. I realize that I will receive no financial compensation for the use of this material.

VOLUNTEER RELEASE HOLD-HARMLESS AND INDEMNIFICATION AGREEMENT (for youth age 17 or under)

I am the parent/legal guardian of the child named below. I recognize that because of the inherent hazards of this activity, my child may sustain some injury. In the event that my child is injured and my spouse or I cannot be contacted, I give my permission to the attending physician to render such treatment as would be normal, and agree to pay the usual charge for such treatment.

I now release the City of Bloomington, its Volunteer Network program, and its employees, agents and assigns for any and all claims for personal injury and/or property damage that may arise from, or be in any way connected to, my child's participation in this activity. I understand that this release applies to both present and future injuries, and that it binds myself, my spouse, my child, and the heirs, executors and administrators of each of these persons. I have read this release and understand all of its terms. I sign it voluntarily and with full knowledge of its significance.

TRANSPORTATION RELEASE HOLD-HARMLESS AND INDEMNIFICATION AGREEMENT (for youth age 17 or under)

In consideration for permission for my child to ride along in a CITY OF BLOOMINGTON vehicle, for my child's benefit only, I agree to the following:

1. To release, hold harmless and indemnify the City of Bloomington, its employees, officers, and agents, for any claim or claims which might arise out of any incident connected with or in any way related to riding in a City of Bloomington vehicle. This includes claims for personal injury, property damage, and/or other types of harm or injury.
2. To release, hold harmless and indemnify the City of Bloomington, its employees, officers, and agents, for any claim or claims arising out of any incident connected with or in any way related to riding in a City of Bloomington vehicle which may be made or asserted by any other person(s) against the City of Bloomington. This includes claims for personal injury, property damage, Workers Compensation and/or any other type of harm or injury.

I understand this release binds my child, myself, my spouse, and all heirs, executors and administrators of those individuals. I have read this release and understand all of its terms. I sign it voluntarily and with full knowledge of its significance.

Purpose of Ride Along: Responsibilities related to volunteer position.

SIGNATURE

If the participant is age 18 or over, please sign here.

Signed: _____ Date: _____

PARENT/GUARDIAN SIGNATURE

If the participant is a minor (age 17 or under), a parent or guardian must sign below:

I have read the above and make the following release for _____
Student's name here. (please print)

Parent/Guardian Name: _____ Relationship to minor: _____
(please print)

Signed: _____ Date: _____

Deadline is Friday, April 6.

HIGH SCHOOL STUDENTS: Please return this completed and signed form to your school's Attendance Office.

COLLEGE STUDENTS: drop off at: City Hall Suite 260, 401 N. Morton St. (M-F, 8 a.m.-5 p.m.) or
mail to: GYSD, c/o City of Bloomington Volunteer Network, PO Box 100, Bloomington, IN 47404