

Date: _____ Event: _____ Name: _____

Knox Area Rescue Ministries Event Volunteer Application

Address: _____ Are you with a group? _____ Group Name _____

City: _____ State: _____ Zip: _____

Home #: _____ Work #: _____ Can you accept personal calls at work? Yes No

Cell #: _____ Fax: _____ E-mail address: _____

Date of Birth _____ I do not wish to receive KARM's newsletter

Are you required to register as a Sex Offender? Yes No *A convicted Sex Offender will not be permitted to volunteer.*

Knox Area Rescue Ministries Volunteer Agreement & Waiver

I, the undersigned volunteer ["Volunteer"] of Knox Area Rescue Ministries ["KARM"] agree and understand that the purpose of this ministry is to rescue the poor and needy of the Knox area by providing recovery services in Jesus' Name. The undersigned agrees and understands that the population served by KARM has many diverse needs and conditions, which include mental, spiritual, emotional, physical, and social maladjustments. I further understand that members of the client population may have difficulty under various circumstances in controlling their verbal and physical behavior, and that inappropriate behavior, including violence, is possible. Based on these understandings, I hereby release KARM and its directors, employees, and agents from any and all claims, responsibility, liability, or causes of action, for any injury, loss, or damage that I may incur in connections with my volunteer activities at KARM.

I further understand that, as a volunteer of the Knox Area Rescue Ministries, any and all information pertaining to individuals served by the ministries is strictly confidential. I understand that I must not divulge the location of Serenity Shelter nor discuss the clients residing at any KARM facility with anyone not currently employed by KARM. I agree to hold in confidence any information about clients or donors, which comes to my knowledge during my association with KARM.

I understand and acknowledge that either party may terminate this volunteer relationship at any time.

I understand and agree that my services are voluntary in nature and I have no expectation of any salary, compensation, benefit, or remuneration of any kind for my time.

I also understand that Knox Area Rescue Ministries is a Christian organization, with the mission of ministering to those in need through the Gospel of Jesus Christ, the living Son of the living God. KARM's foundation of Faith is that everyone is created equal and is able to receive salvation by the Grace of God through Jesus Christ. I hereby agree to not share any different belief system to the clients at any KARM facility. KARM's mission is carried-out through faith in Jesus, and if my belief system does not share this same understanding, I agree to not interfere with KARM's mission by offering different religious beliefs.

Upon request, I agree to provide proof of licensure or certification prior to performing any professional or skilled task. Upon request, I also agree to provide references and I hereby authorize KARM to verify any such information.

Volunteer's Signature

Volunteer's Name Printed

Knox Area Rescue Ministries

Date

By

If you are volunteering with a Group, please give the name of the Group. _____

If you are under 18 years of age, please have your parent or legal guardian sign below.

Parent's Signature