

Michigan Envirothon Volunteer Application Form - *continued*

The following information will be kept **confidential** and only used to contact the person you designate in the event of an emergency. Any personal medical information will be provided to medical staff overseeing your care in the event of an emergency where your health may be threatened. We request this information to safeguard our volunteers.

EMERGENCY CONTACT INFORMATION

Name of person to contact in the event of an emergency:

First Name:

Last Name:

Relationship to You:

Cell Phone Number (if available):

Daytime Phone Number:

Evening Phone Number:

Physician's Name:

Physician's Phone Number:

Please list any allergies you have (foods such as peanuts or shellfish, or reactions to bee stings, or medications):

Please list all medications you take; (both over-the-counter and prescribed by a physician):

Is there any health reason or physical limitations you have that might limit your ability to volunteer?

OTHER SKILLS OR VOLUNTEER OPPORTUNITIES YOU WISH TO OFFER

Please list any additional skills or talents you have or volunteer activities you are interested in. (i.e., newsletters, office work, etc.):

VOLUNTEER PRIVACY INFORMATION AND RELEASE AUTHORIZATION

Please READ the following and sign at the bottom if you consent to all of the following statements.

I hereby certify and affirm that all information that I have provided in this application is true and complete. I understand that any false information or omission may disqualify me from further consideration for volunteer service and may result in my dismissal if discovered.

I understand, in consideration of my application, a background investigation may be conducted. I understand this investigation may include, but is not limited to, a criminal background check in the files of any federal, state or local justice agency, driving history, drug screening or reference verification. I authorize Michigan Envirothon and the Michigan Association of Conservation Districts (MACD) and all associated entities to conduct a background investigation.

I understand the requested information is for the sole purpose of gathering accurate information for volunteer services with Michigan Envirothon.

I give the Michigan Envirothon and MACD permission to use my name, likeness, and image that is embodied in any pictures, photos, video recordings or digital images for their publications and promotional or educational use. I acknowledge that I will not receive any compensation for the use of such images.

I understand that Michigan Envirothon, the MACD and all associated entities assumes no liability while I volunteer.

I have read and understand the above and by my signature consent to these statements.

Signature of Applicant

Date