

Volunteer Application 2024

Thank you for your interest in volunteering with the Southern Oregon Historical Society.

The following information is required for the Southern Oregon Historical Society to best place you in a volunteer position, to be able to communicate quickly with you, and to do a background check should any of your work with SOHS require it.

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PLEASE NOTE: All sections marked with * are required; you may mark sections not applicable to you with N/A.
 If you are a current volunteer, you can omit the References section marked with #.

VOLUNTEER INFORMATION

Today's Date: ___ / ___ / ___

First Name:* _____ Last Name:* _____

Phone:* () _____ Cell Phone: () _____ Email:* _____

Home Address:* _____

City:* _____ State:* _____ Zip:* _____

Employer: _____

Birthdate:* ___ / ___ / ___ *Note: Birthdate is required for our background check process.*

VOLUNTEER POSITION INTEREST

Are you applying to a specific program or position?* _____

What kind of volunteer activities are you interested in?

Please check all that apply.

- Education and Children's Events
- Collections
- Historic 1946 Fire Engine
- Hanley Farm Events
- Hanley Farm Grounds and Gardens
- Hanley House Tours
- Library and Archives

Days/Times on which you could volunteer?

- Monday Morning
- Tuesday Afternoon
- Wednesday Evening
- Thursday
- Friday
- Saturday
- Sunday

Comments: _____

Have you volunteered at SOHS before? If yes, please list your volunteer role(s): _____

EMERGENCY CONTACT

First Name:* _____ Last Name:* _____

Phone:* () _____ Email:* _____ Relationship:* _____

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REFERENCES

We contact references for all volunteer positions that work with children or vulnerable adults. Work, volunteer, school, or personal references (excluding family members or spouse/partners) are acceptable. We contact references after a prospective volunteer attends an orientation. Two references are required.

First Name:* _____ Last Name:* _____

Phone:* (_____) _____ Email:* _____ Relationship:* _____

First Name:* _____ Last Name:* _____

Phone:* (_____) _____ Email:* _____ Relationship:* _____

AUTHORIZATION*

I certify that the answers given in this application are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application as may be necessary for the purposes of determining an appropriate and satisfactory volunteer position for me, including contacting my references. I understand that this application is not, and is not intended to be, a contract. I understand that false or misleading information provided in my application or interview may result in my not being able to continue as a volunteer with the Southern Oregon Historical Society.

_____ (Initial) Authorization*

LIABILITY RELEASE*

By entering your name in the signature field below, you are agreeing to the following:

In consideration for the Southern Oregon Historical Society allowing me to participate as a volunteer in its volunteer program, I hereby release the Society, its trustees, staff, and employees from any claims for personal injury or property damage arising out of my participation in the program beyond what is normally covered by a blanket accident insurance policy which the Society carries for volunteers. I understand that an injury sustained by me while participating in the volunteer program will not be covered by worker's compensation.

_____ (Initial) Liability Release*

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Volunteer Signature:* _____ Date: ____ / ____ / ____

Please note: If you are under 18, your parent or guardian may also need to sign an Underage Volunteer Waiver.

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Please submit your completed application by email or mail:

volunteers@sohs.org | PH: 541.622.2025 ext. 202 | 106 N. Central Ave. Medford, OR 97501