# RUTH ECKERD HALL RICHARD B. BAUMGARDNER CENTER FOR THE PERFORMING ARTS

#### **VOLUNTEER APPLICATION**

NAME			TELEPHONE		
AD	DRESS				
СІТ	Y		STATE		ZIP
EM	AIL				
WH	IERE DID YOU LEA	RN ABOUT TH	E RUTH ECKERD HALL PER	FORMING ARTS V	OLUNTEER PROGRAM?
	WEBSITE	PUBLICATION		TV/RADIO	
	PERFORMANCE	REH VOL	UNTEER	0	THER
	I <b>AT IS YOUR CURF</b> FULL TIME PART TIME RETIRED		ATUS? UNEMPLOYED STUDENT FUDENT, NAME OF SCHOOL/	UNIVERSITY	
	MONDAY TUESDAY WEDNESDAY THURSDAY FRIDAY SATURDAY/SUNI	DAY			
			R & IN WHAT CAPACITY?		
·					

001	<u>nputer Skills:</u>	<u>Oth</u>	er Skills:	
	PowerPoint		General Office	
	Excel		Data Entry	
	Word		Customer Service	
	Publisher		Sales (Concessions)	
	Other		Painting/Maintenance	
			Technical Production	
			Graphic Design	
			Other	
	A INTERESTED IN VOLUNTEERING AS/IN: P			
	Usher		General Labor/Painting	
	Community Events/Festivals		Mailroom	
	Education/Summer Camps		Technical Production	
	Office/Administration		Other	
WH	Y ARE YOU INTERESTED IN VOLUNTEERING	g fof	REH?	
AN	OTHER INFORMATION YOU WOULD LIKE	TO S	HARE?	
AN	OTHER INFORMATION YOU WOULD LIKE	TO S	HARE?	
AN'	OTHER INFORMATION YOU WOULD LIKE	TO S	HARE?	
AN'	OTHER INFORMATION YOU WOULD LIKE	TO S	HARE?	
		TO S	HARE?	
	CASE OF AN EMERGENCY, NOTIFY:	TO S	HARE?	
	CASE OF AN EMERGENCY, NOTIFY:		PHONE	
	CASE OF AN EMERGENCY, NOTIFY:			
	CASE OF AN EMERGENCY, NOTIFY:		PHONE	
	CASE OF AN EMERGENCY, NOTIFY:		PHONE	
	CASE OF AN EMERGENCY, NOTIFY:		PHONE	
	CASE OF AN EMERGENCY, NOTIFY:		PHONE	
IN C	CASE OF AN EMERGENCY, NOTIFY:		PHONE	
IN C	CASE OF AN EMERGENCY, NOTIFY:   ME   ATIONSHIP		PHONE CITY, STATE	

Please email this application to: <u>HR@rutheckerdhall.net</u>



### **Background Release Form**

Applicant: Review and sign this form authorizing Ruth Eckerd Hall to perform a background review for your employment consideration.

This notice is to inform you that we will be conducting a pre-employment background investigation in conjunction with your application for employment with our company. This background investigation may involve verifying or reviewing any of the following relevant information:

- Social Security number
- Driving record
- Criminal convictions
- Prior employment history
- Educational history

#### Consent to Conduct Background Check

As a condition of and in consideration of employment, I give permission to Ruth Eckerd Hall to check any of my personal history listed above. Further, I give permission to Ruth Eckerd Hall to conduct this check and to discuss results in connection with my employment application.

#### **Consent to Contact Past Employers**

I understand that Ruth Eckerd Hall may request to contact any or all past employers listed on my application. Further, per my indication on the employment application, I give permission to my current or past employers to discuss my relevant employment history with the company, verbally or in writing.

#### No Promise of Employment

I understand that neither the completion of this application nor any other part of my consideration for employment gives any obligation for Ruth Eckerd Hall to hire me.

#### **Falsification Statement**

I attest with my signature below that I have given to Ruth Eckerd Hall true and complete information on this application. No requested information has been concealed. If any information I have provided is untrue, or if I have concealed material information, I understand that this will constitute cause for the denial of employment or immediate dismissal.

#### Equal Employment Statement

Ruth Eckerd Hall is an equal opportunity employer. All applicants are considered for all positions without regard to race, religion, color, sex, gender, sexual orientation, pregnancy, age, national origin, ancestry, physical/mental disability, medical condition, military/veteran status, genetic information, marital status, ethnicity, alienage or any other protected classification, in accordance with applicable federal, state, and local laws.



My signature acknowledges that I have carefully reviewed and acknowledge that Ruth Eckerd Hall may perform a background review as described above. I give permission for an HR representative to email me a link from Universal Background Screening and I understand a background check will be completed on me as a condition of employment.

Signature:			
Name (print):			
Date:			
Email Address:	 		_

Ruth Eckerd Hall may use information in the consumer report for decisions related to your employment. A copy of the report will be provided to you, free of charge, if you wish. If you wish to receive a copy of the report, please include your address below.

This notice and authorization are in accordance with the Fair Credit Reporting Act.

I wish to receive a copy of my consumer report. My address is:

Print name			
Street address	City	State	ZIP code

## RUTH ECKERD HALL RICHARD B. BAUMGARDNER CENTER FOR THE PERFORMING ARTS

#### Volunteer Letter of Agreement - General

I, \_\_\_\_\_\_, represent that I am at least 18 years old. I have decided to assist Ruth Eckerd Hall ("REH") in its mission to engage the community to master, experience, discover, and explore quality performing arts by volunteering my services to REH. The volunteer work that I am performing for REH is for my own benefit and the benefit of the general public.

I understand, intend, and agree that I am a volunteer, and I intend any services I perform under this Agreement to be performed strictly in a volunteer capacity. I further understand and agree that I will not be entitled to compensation for my services from REH. My time and service in this volunteer capacity are given without promise, expectation or receipt of any form of compensation, benefits or other remuneration for this service. I further understand and agree that I do not and will not become an employee of REH for any purpose by reason of the services I am volunteering.

I further agree that no particular schedule or hours of service are guaranteed for the volunteer work with REH.

I understand and agree that by voluntarily providing my services to REH, I assume all risks of the activities and services at my assignment. I further understand that I do not qualify for workers' compensation benefits. I agree, for myself, for my heirs, successors and assigns, that I release REH, its Board of Directors, employees, and agents, from any and all claims, damages, and injuries, including injuries to person or property, arising out of activities or services at my volunteer assignment. I further agree, for myself and for my heirs, successors and assigns, that I shall defend, indemnify and hold harmless REH, its Board of Directors, employees, and agents from and against any losses, claims, expenses and demands, including attorneys' fees, that are related, directly or indirectly, to any injury, illness or death arising from or in connection with activities at my volunteer assignment.

My signature acknowledges that I have read, understand, and agree to the above-mentioned conditions and expectations.

Volunteer's Signature

Date

17515733.1