



Volunteer Application Form

Name _____ Age (optional) _____

Address _____

Email _____ Phone _____

Do you have experience working with children?
Tell us:

What days are you available?

- Monday
- Tuesday
- Wednesday
- Thursday

Do you have musical experience?
Tell us:

What is the best time for you?

(Classes run 2:30-4:30 Mon/Wed,
and 2:30-5:15 Tues/Thu)

What interests you about volunteering with BMA?

Please indicate areas where you are interested in volunteering:

Classes

- Choir
- Violin/viola
- Cello
- Orchestra
- Orff
- Piano accompanist

Kitchen

- Snack service including:
 - Room setup
 - Serving snack
 - Snack cleanup

Logistics

- Picking up students*
- Walking school bus
- Room setup
- Concert setup
- Classtime monitor

**BMA's insurance policy can cover volunteer drivers, even when using their own vehicle.*

Do you already have a criminal record check? Yes No

(BMA will reimburse volunteers for the cost of their criminal record check)

Volunteer Agreement

Please read the agreement and sign below. Applications are not accepted without a signature.

1. **AGREEMENT OF COMMITMENT:** To have a successfully run program, regular attendance is vital. When possible, it is important to notify the Bakerview Music Academy at least 24 hours in advance.
2. **POLICIES & PROCEDURES:** Volunteers are required to comply with the Academy's policies and procedures as published, amended by the Academy from time to time in its sole discretion. All volunteers must provide information and consent for a criminal record check. In the event of a conflict between the Academy's policies and procedures and this agreement, the agreement will take precedence.

3. IN CASE OF EMERGENCY CONTACT

Name, relation

Phone

Name, relation

Phone

4. **MEDIA RELEASE.** In order for Bakerview Music Academy to raise the support needed to offer its programs, I hereby grant permission for it to use my child's photo, video footage and/or interview, and I hereby give authorization to the Bakerview Music Academy and their partner organizations the right and permission to photograph, film, and record me or my child(ren) and use and reuse my/their picture, video, interview and likeness, in whole or in part, individually or in conjunction with visual, audio or written material in any medium (including newsletters, Facebook, Instagram, Twitter and website). I hereby release and discharge both parties from any and all claims and demands.
5. **INDEMNITY AND RELEASE OF LIABILITY.** I hereby remit, release, and forever discharge the Bakerview Music Academy Society, its employees or agents, and volunteers of and from all manner of actions, causes of actions, claims and demands of whatsoever nature which my child may have in respect of any injury, loss or expense he/she may sustain arising out of or in any way connected with his/her participation in the activities of the Bakerview Music Academy or while being transported to and from the Academy or special events.

I hereby agree to the above Volunteer Agreements:

Signature: _____ Date: _____

Volunteer's Name (Please Print): _____