

ARIZONA'S CHILDREN ASSOCIATION AND ITS FAMILY OF AGENCIES
(The Parent Connection, Golden Gate Community Center, Child Haven, Las Familias,
New Directions Institute, Southern Arizona Center Against Sexual Assault)

VOLUNTEER APPLICATION

CENTRAL REGION
 2833 N. 3rd Street
 Phoenix, AZ 85004
 (602) 234-3733

MID-CENTRAL REGION
 2066 W. Apache Trail Rd, Ste 112
 Apache Junction, AZ 85220
 (480) 503-8530

NORTHERN REGION
 440 N. Washington Ave
 Prescott, AZ 86301
 (928) 443-1991

SOUTHERN REGION
 2700 South 8th Ave
 Tucson, AZ 85713
 (520) 622-7611

WESTERN REGION
 3780 S. 4th Ave, K
 Yuma, AZ 85365
 (928) 344-8800

THIS IS A NON-SMOKING, DRUG FREE AGENCY

PLEASE PRINT LEGIBLY AND IN INK - COMPLETE ALL FIVE (5) PAGES

DATE: _____ Dr. Mr. Mrs. Ms. Other _____

LAST NAME: _____ FIRST NAME: _____

MAILING ADDRESS: _____

CITY, STATE, ZIP CODE: _____

TELEPHONE: () _____ MOBILE PHONE: () _____

EMAIL: _____

Are you at least 18 years of age? Yes _____ No _____

Are you at least 21 years of age? Yes _____ No _____

How did you hear of our Volunteer Program?:

Is there a particular volunteer opportunity with Arizona's Children Association that interests you?:

What times are you usually available to volunteer?

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday

Section 1: Skills and Interests

Please indicate your hobbies and interests as well as areas in which you have professional, educational, or life experiences in which you are interested to share your skills.

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|--|--|--|
| <ul style="list-style-type: none"> — Art — Calligraphy — Crafts — Sewing — Music — Dance — Drama — Reading — Writing — Photography — Scrapbooking — Sports — Horseback Riding — Hunting — Fishing | <ul style="list-style-type: none"> — Hiking/Camping — Bicycling — Carpentry — Mechanics — Informal Group Discussions — Bilingual — Typing — Computers — Clerical Skills — Public Speaking — CPR/First Aid Training — Event Planning — Marketing | <ul style="list-style-type: none"> — Fundraising <p>Experience with:</p> <ul style="list-style-type: none"> — Preschoolers — Teenagers — Emotionally Handicapped — Learning Disabled — Substance Abuse — Mentoring children/teens |
|--|--|--|

Additional Information/Comments:

What do you picture yourself doing when you volunteer?:

Section 2: Education: two highest degrees earned

Name of School	Graduate: Yes/No	Major	Degree: i.e. High School Diploma, BS, MA, PhD, etc

Section 3: Volunteer Experience

Name of Organization	Length of Service	Reason for Leaving	Description of Activities Performed

Section 4: Work Experience

Employer	Dates From/To	Supervisor/Phone	Duties Performed

Section 5: References

Please provide four people who we can contact as a reference. At least three must be professional references.

Name	Full Address, City, State, Zip Code	Phone Number	Email Address	Relationship to You

APPLICATION CERTIFICATION

Arizona's Children Association (AzCA) does not discriminate on the basis of race, color, religion, sex, national origin, age (over 40), non job related handicap or disability or any other basis prohibited by law.

In consideration of the opportunity afforded to me to participate in an Arizona's Children Association (AzCA) event, and in light of the aims and charitable purposes of the community services provided by AzCA, I hereby agree as follows:

1. VOLUNTEERS: I understand that volunteer workers have voluntarily agreed to assist in Arizona's Children Association projects, the volunteers will not be paid for their services, and that no medical insurance or workers compensation benefits will be provided by AzCA, and that the participation of individual volunteers may be terminated at any time by the volunteers or by AzCA.
2. ASSUMPTION OF RISK AND WAIVER OF LIABILITY: I am aware that in connection with activities associated with the project, I may be exposed to personal or bodily injury or damage to my property. With full knowledge of the potential dangers involved, I, on behalf of myself, my assignees, heirs, guardians and legal representatives, agree and assume any and all risks of property damage, personal injury or death, and hereby voluntarily and fully waive, relinquish and release any and all rights, claims and causes of action against Arizona's Children Association, its agents, employees, officers and directors, the suppliers, sponsors and volunteers to the projects, collectively, and acknowledge the foregoing by placing my signature here:



KNOWING AND VOLUNTARY EXECUTION: I, the undersigned, have carefully read this waiver of liability, fully understand its contents, and am aware that this is a release of liability and contract with Arizona's Children Association, and sign it of my own free will.

I voluntarily and knowingly authorize any present employer or supervisor, past employer or supervisor, college, university or other institution of learning, administrator, state agency, federal agency, private business, personal reference, and/or other persons, to give records or information they may have concerning motor vehicle history, wages earned, character, and employment records or any other information requested by AzCA or any agent named by AzCA. I, voluntarily and knowingly, unconditionally release and forever discharge AzCA and any named or unnamed informant from any and all liability related to obtaining, furnishing or using this information. This authorization will be valid from the date signed and continue for as long as I am employed by AzCA and a photographic or faxed copy of the authorization shall be valid as the original.

I certify that my statements on this application and any supporting documents and my response to all of the foregoing questions are true and correct, and there is no information that I have omitted, misrepresented or failed to include. If any of my statements or responses on this application are found to be untrue, misrepresented or omitted, I understand that such a finding may result in the rejection of my application, and, if volunteering, my immediate discharge or discharge at any time during my volunteering.

Signature: _____ Date: _____

Completed Applications May Be Returned To:

(For Mohave, Coconino, Navajo, Apache, LaPaz, Yuma, Yavapai, and Maricopa Counties)

Leah Stegman
Central Region Volunteer Coordinator
c/o Arizona's Children Association
2833 N 3rd Street
Phoenix, AZ 85004
Fax: 602-248-8150
Phone: 602-234-3733, or 1-800-944-7611, ext 111
Email: lstegman@arizonaschildren.org

(For Pima, Santa Cruz, Cochise, Graham, Greenlee, and Gila Counties)

Miguel Quezada
Director of Development
c/o Arizona's Children Association
2700 S 8th Avenue
Tucson, AZ 85713
Fax: 520-624-7042
Phone: 520-622-7611 or 1-800-947-7611
Email: mquezada@arizonaschildren.org