



# 2018 Volunteer Application

*Therapeutic Recreation for People with Disabilities or Cancer*  
 6901 Goldenstein Lane • Bozeman, MT 59715  
 406-586-1781 FAX 406-586-5794  
 e-mail: eaglemount@eaglemount.org

FOR OFFICE USE ONLY

DP \_\_\_\_\_  BGC DATE \_\_\_\_\_

*Thank you for completing the following questions and for your interest in being an Eagle Mount Bozeman volunteer.  
 The gift of your time allows us to offer these programs.*

Legal Name \_\_\_\_\_ Birthdate \_\_\_\_\_ Sex  M  F

I prefer to be called \_\_\_\_\_  Student \_\_\_\_\_

Mailing Address \_\_\_\_\_  
Street Address City State Zip

Daytime Phone Number(s) \_\_\_\_\_  
 Cell  Home  Work

Email \_\_\_\_\_ The best way to contact me is: \_\_\_\_\_

Please list any relevant certifications/skills (PSIA, PATH, CPR, WFR, ASL, etc.) \_\_\_\_\_

### EMERGENCY INFORMATION - REQUIRED

Food/Drug Allergies \_\_\_\_\_

Existing Conditions/Meds/Physical Limitations \_\_\_\_\_

**\*Emergency Contact**  
Name Relationship Phone Number

#### Check program(s) you are interested in:

See 2018 Bulletin or website for program descriptions.

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> XC-Ski/Snowshoe**                        | <input type="checkbox"/> Horticulture   | <input type="checkbox"/> Aquatic (Swim) Program             |
| <input type="checkbox"/> Downhill Ski Program**                   | <input type="checkbox"/> Adventure Days | <input type="checkbox"/> Therapeutic Horsemanship           |
| <input type="checkbox"/> Bridger <input type="checkbox"/> Big Sky | <input type="checkbox"/> Cycling        | <input type="checkbox"/> Saturday Night Out/Kids' Night Out |
| <input type="checkbox"/> Ski <input type="checkbox"/> Snowboard   | <input type="checkbox"/> Climbing       | <input type="checkbox"/> Office/Special Events              |
| **please also complete the Ski Volunteer Form                     | <input type="checkbox"/> Ice Skating    |   |

**Days and Times Available:** Please indicate when you are potentially available (SKI: use the Ski Volunteer form)

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
AM							
PM							

Eagle Mount requires all adult volunteers (those over 18) to complete a background check every three years.  
**PLEASE VISIT OUR WEBSITE FOR INFORMATION ON HOW TO COMPLETE THE BACKGROUND CHECK:**  
[www.eaglemount.org/volunteer/general-information/](http://www.eaglemount.org/volunteer/general-information/)

#### EAGLE MOUNT BOZEMAN

- I agree to respect Eagle Mount Bozeman participants', staff, and volunteers' rights with regard to privacy of information and to keep "professional" confidentiality in all my statements both within and outside of the organization.
- I understand that Eagle Mount Bozeman staff members have the authority to exclude participants or volunteers from the program for behavior they deem to be unsafe. Use of alcohol or illegal drugs is unsafe behavior.
- I give my consent to Eagle Mount Bozeman and its medical representative to obtain medical care from any licensed physician, hospital, or clinic, for any injury that could arise from participation in Eagle Mount Bozeman activities.

X \_\_\_\_\_  
 Signature of Volunteer/Guardian Date

PLEASE COMPLETE BOTH SIDES OF THIS FORM



# VOLUNTEER ASSUMPTION OF RISK

PLEASE READ THIS ENTIRE DOCUMENT CAREFULLY BEFORE SIGNING. All volunteers must sign this document. For volunteers under 18 yrs. of age, one or both parent(s) or legal guardian(s) must also sign. Throughout this document, volunteers under 18 yrs. of age will be referred to sometimes as 'minor' or 'child,' and parent(s) and guardian(s) will be referred to collectively as 'parent(s).' In consideration of the services of Eagle Mount Bozeman, and its employees, representatives, volunteers, board members, and all other persons or entities associated with them (collectively referred to in this Document as 'Eagle Mount'), the undersigned volunteer and parent(s) of a minor volunteer, acknowledge and agree as follows:

I (and my Parent(s), if I am a minor) agree and acknowledge that participating in Eagle Mount Bozeman programs activities involves inherent and other risks, hazards and dangers that can cause or lead to injury, property damage, illness, mental or emotional trauma, disability or death to participant or others. The following includes some, but not all, of those risks, hazards, and dangers:

Risks present in outdoor, skiing, horse activities, swimming, boating, and mountainous environments include storms, strong winds, avalanches, snow or ice, falling rocks or other objects, lightning, high altitudes, rapidly moving rivers or streams, currents, waves, whitewater, stream or river crossings, extremely hot or cold weather or contaminated water, wild animals, disease carrying or poisonous animals or insects, and other natural or manmade hazards, unexpected animal movements or actions, risks of skiing rock climbing, and the like. Risks in decision making including, without limitation, the risk that Eagle Mount Bozeman may misjudge weather, terrain, water conditions, or route location, or they may misjudge a participant's or a volunteer's capabilities. Equipment may be misused, or may break, fail, or otherwise malfunction. Remote locations present risks including delays and difficulties with communication, transportation, evacuation and medical care. Medical facilities may be hours or even days away from the program location. Travel may be by foot, motor vehicle, boat, kayak, horse, bicycle or other means and can be over rough and hazardous terrain. Conduct risks include the potential that the volunteer, other volunteers or participants, or third parties (e.g. general public, rescue personnel, or medical personnel) may act carelessly or recklessly.

These and other risks, hazards and dangers may result in volunteers falling, being struck, colliding with objects or people, experiencing vehicle collision, being thrown or falling from horse, drowning, reacting to weather conditions or increased exertion, suffering complications or allergic reactions, becoming disoriented, or experiencing other problems. These and other circumstances may cause hyperthermia, hypothermia, dehydration, heart or lung complications, broken bones, head injury, paralysis, or other injury, damage, death or loss.

I (volunteer and Parent(s) of a minor volunteer) acknowledge:

- I have accurately completed all required forms and reviewed and understand all Eagle Mount Bozeman program information and materials received;
- I have disclosed to Eagle Mount Bozeman any medical or physical conditions which may affect my (or my child's) volunteering in the program;
- Eagle Mount Bozeman representatives are available if I have questions about the physical demands of and the risks associated with these activities;
- Eagle Mount cannot assure volunteers' safety or eliminate these or other risks.

Volunteer is voluntarily participating with knowledge of the risks. Therefore, volunteer (and Parent(s) of minors) assumes and accepts full responsibility for the risks of these activities (both known and unknown), and for any injury, damage, death or other loss suffered by volunteer (and Parent(s) of minors), resulting from those risks or resulting from volunteer's negligence or other misconduct.

## RELEASE AND INDEMNITY AGREEMENT

Please read carefully. This Release and Indemnity agreement contains a surrender of certain legal rights. I (adult volunteer or Parent(s) of a minor volunteer) agree as follows:

- (1) to release and agree not to sue Eagle Mount Bozeman, its Board of Directors, employees, representatives, and other volunteers with respect to all claims, liabilities, suits or expenses (including attorneys' fees and costs) (hereafter collectively 'claim' or 'claims'), in any way connected with my/my child's enrollment or volunteering in these activities. I understand I agree here to waive all claims I may have against Eagle Mount Bozeman and agree that neither I, nor anyone acting on my behalf, will make a claim against Eagle Mount Bozeman as a result of any injury, damage, death or other loss suffered by me or my child;
- (2) to defend and indemnify ('indemnify' meaning protect by reimbursement or payment) Eagle Mount Bozeman with respect to all claims brought by or on behalf of me, my child, or a family member, in any way connected with my/my child's enrollment or volunteering in these activities or use of Eagle Mount Bozeman equipment or facilities.

This Release and Indemnity Agreement includes any losses caused or alleged to be caused, in whole or in part, by the negligence of Eagle Mount Bozeman (but not its gross negligence or intentional or reckless misconduct), and includes claims for personal injury, property damage, wrongful death, breach of contract or otherwise.

**Eagle Mount is required by law to include the following: By signing this document you may be waiving your legal right to a jury trial to hold the provider legally responsible for any injuries or damages resulting from risks inherent in the sport or recreational opportunity or for any injuries or damages you may suffer due to the provider's ordinary negligence that are the result of the provider's failure to exercise reasonable care.**

X \_\_\_\_\_  
Signature of Volunteer or Guardian Name (if Guardian) & Date (PLEASE PRINT)

## MEDIA RELEASE FORM

Name \_\_\_\_\_ Age \_\_\_\_\_ Male \_\_\_ Female \_\_\_  
(PLEASE PRINT CLEARLY)

MEDIA/PHOTO WAIVER: I hereby authorize and give my full consent to Eagle Mount Bozeman to copyright and/or publish any and all photographs, videotapes and/or film in which I appear while attending Eagle Mount event and programs. I further agree that Eagle Mount Bozeman may transfer, use or cause to be used, these photographs, videotapes, or films for any exhibitions, public displays, publications, commercials, art and advertising purposes, and television programs without limitations or reservations.

X \_\_\_\_\_  
Signature of Volunteer or Guardian Name (if Guardian) & Date (PLEASE PRINT)