



"A planting of the Lord for the display of His splendor." Isaiah 61:3

VOLUNTEER APPLICATION

NAME _____ Date _____

ADDRESS _____ Tel _____

_____ Cell# _____

_____ Email _____

DRIVERS LICENSE # _____

EMERGENCY CONTACT _____

CHURCH
AFFILIATION _____

WHEN ARE YOU AVAILABLE TO VOLUNTEER? (specify days and AM/PM)

PLEASE CHECK YOUR AREA(S) OF INTEREST:

OFFICE: ___(computer work)___(web site) COMMUNITY DEVELOPMENT:
___(Fundraising team)___(Communication contact for your church or organization)
___(Write articles for website, newspapers, etc.)___(photography)

WORK WITH CLIENTS: ___(Prayer team)___(Lead a Bible study)___(Mentor)
___(Driver Team/must have copy of insurance)___(Help with group counseling)
___(Tutoring)___(Share a hobby)___(Plan and participate in "fun" activity - movie night,
game night, etc.)___(Help with meal planning, shopping, nutrition)___(exercise - yoga,
jazzercise, zumba, etc.)

MAINTENANCE: ___(grounds/gardens)___(outside maintenance-painting,etc.)
___(interior maintenance-painting, plumbing, general house repair)



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Use the back of this form to describe any special talents or skills you feel would benefit our ladies or elaborate on why you desire to volunteer at Oaks of Righteousness.

BACKGROUND CHECK

Oaks of Righteousness may require background checks on persons who are volunteering. A criminal conviction does not automatically prevent someone from volunteering. When the offense was committed and the nature of the offense will be taken into consideration.

I agree to have a background check.

REFERENCES: List two people, not related to you, who have knowledge of your qualifications.

NAME _____

ADDRESS _____

TEL # _____

NAME _____

ADDRESS _____

TEL # _____

As a volunteer of Oaks of Righteousness I agree to abide by all policies and procedures. I understand that I will receive no monetary benefits in return for my volunteer services and that Oaks of Righteousness can terminate this agreement at any time without prior notice for any reason. I, hereby, authorize Oaks of Righteousness to check my references and I understand a criminal background check is required.

I hereby release and Waive liability against Oaks of Righteousness, a non-profit corporation, its directors, employees and agents, for any injuries or illness that I may suffer in connection with any volunteer work for Oaks of Righteousness. Further, I agree that Oaks of Righteousness is not liable for any damage to my property resulting from volunteer work.



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VOLUNTEER SIGNATURE _____
DATE _____

CONFIDENTIALITY AND NEWS PHOTO RELEASE

DATE: _____

I _____ agree to keep all information about participants and business of Oaks of Righteousness confidential and also agree to release right to use my photo in all publications which includes Oaks of Righteousness website, Facebook page, and advertising/fundraising literature.

SIGNATURE _____

Please return the completed volunteer application by email or mail.

Email: info@oaksoftexas.org

Mailing Address: Oaks of Righteousness, P.O. Box 1731, Humble, TX 77347