



StreetWise Georgia Group Volunteer Application

Group Name/Organization: _____

Address: _____
(Street) (City) (State) (Zip)

Contact Name: _____
(Last) (First) (M.I.)

Phone: _____ Fax: _____ E-mail: _____

Number of members interested in volunteering: _____

Please describe your group and its focus:

❖ OBJECTIVE: Team Building Special Project Educational Community Service

Other: _____

❖ COMMITMENT:

Short-term Project ___1-2 Hours ___½ Day ___1 Day ___Several Days

On-going Partnership ___Weekly ___Monthly ___Several times per year

GROUP CONSIDERATIONS (please check all that apply and explain):

Age Physical Health Mobility Other

Please explain: _____

❖ AVAILABILITY (Please indicate the best day(s) and time(s) for your group):

• Mon Tues Wed Thurs Fri Sat OR

• Any Weekday Any Saturday AM Only PM Only OR

• Specific Date(s): _____ Specific Time(s): _____

❖ LOCATIONS & INTERESTS (please select area(s) most interesting to you/your group):

Lawrenceville Location:
___ Exterior Improvement
___ Interior Improvement
___ Assisting Daily Intake
___ Special Events
___ Facility Repair

Auburn Location:
___ Exterior Improvement
___ Interior Improvement
___ Tuesday Bible Study
___ Special Events
___ Facility Repair

Specific Event(s):
___ Mobile Food Pantry
___ Easter Event
___ Backpack Day
___ Block Party
___ Thanksgiving Event
___ Christmas Event

STREETWISE GEORGIA | GROUP VOLUNTEER POLICY

Please make certain you have read and agree to the following before signing

- Groups scheduled for volunteer placement will be sent a Group Volunteer Agreement defining the volunteer project(s) prior to the start date of the project(s).
- Volunteers agree to perform service without compensation and are not considered employees of StreetWise Georgia. As such, StreetWise Georgia (hereafter referred to as SW) does not provide Worker's Compensation or any other insurance coverage for volunteers.
- Although SW makes every effort to provide safe working conditions, Group Volunteers must identify a Group Contact prior to the start of a project who will be held responsible for the safety and well-being of all group members. The group contact agrees to:
 1. Provide coordination and supervision for group while volunteering.
 2. Ensure that all members adhere to organization rules, regulations, and procedures.
 3. Report to SW any behavior, actions, or language inappropriate for the established activity, location, or group which may endanger the health and/or well-being of the individual, other group members, or clientele.
- Volunteer Opportunities for youth aged 18 years and younger are governed by applicable child labor laws. A responsible adult must accompany volunteers under the age of 18 at all times during the stated period of service work, after the aforesaid individual has presented the Group Contact with a signed Parental Consent Form, which must remain on file with the Group Coordinator prior to and during the under-aged individuals period of service.
- SW accepts the service of all volunteers with the understanding that approval for such service is at the sole discretion of SW. Although SW makes every effort to match volunteer applicants to volunteer opportunities according to the needs of SW and the interests and availability of the volunteer(s), SW cannot guarantee volunteer placement. Therefore, SW further reserves the right to withhold approval of the individual or group for such reason(s).
- Volunteers agree that SW may at any time, for any reason, decide to terminate the volunteer's relationship with SW. Volunteers may at any time, for any reason, decide to sever the volunteer's relationship with SW. Notice of such a decision should be communicated as soon as possible to the volunteer's supervisor.

I understand that neither StreetWise Georgia nor any of its employees or volunteers will assume any financial liability for any injury or illness that I, or any member in attendance with me, might incur while performing voluntary service for StreetWise Georgia. I have read the above policy and understand the risks involved in being a volunteer for StreetWise Georgia. I further understand that transportation to and from project sites will not be provided by organization employees or volunteers unless otherwise agreed upon by StreetWise Georgia prior to the event.

Signature of Applicant/Group Contact

Date

Return completed form to:

StreetWise Georgia

P.O. Box 657

Dacula, GA 30019

Office Phone: 678-985-9915

Fax: 678-985-9968

Email: volunteer@streetwisegeorgia.org