

Seaside Seabird SANCTUARY

18328 Gulf Blvd Indian Shores, FL 33785
Phone 727-391-6211 Fax 727-399-2923

Volunteer Application

Today's Date: _____

Last Name: _____ First Name: _____

Date of Birth: _____ Email: _____

Address: _____ Apt./Unit# _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

Emergency Contact Name: _____ Phone: _____

Present Occupation: _____ Position/Title: _____

Start Date: _____

Volunteer Experience:

Why are you interested in volunteering with Seaside Seabird Sanctuary?

Please indicate days available (*circle all that apply*): Mon Tues Wed Thur Fri Sat Sun

Available times are anywhere between: 7AM to 3PM daily - Open 7 days a week

VOLUNTEER AND BOARD OF DIRECTORS RELEASE

As a volunteer at Seaside Seabird Sanctuary, LLC, I realize that I am not a paid employee and am not covered by any worker's compensation or any other insurance or guaranteed medical payments coverage which would compensate me should I become sick or injured while on the premises of the Seaside Seabird Sanctuary, LLC, or off the premises while working for the Sanctuary. I understand that I may be working with sick/injured birds and that in some remote situation I might be susceptible to illness or injury. I fully release discharge and hold harmless forever the Seaside Seabird Sanctuary, LLC, its members, Officers, Staff, Board of Directors, and other volunteers from any and all things, acts, omissions or conditions which cause damage or injury or otherwise.

I have read and received a copy of volunteer's worker policy.

APPLICANT'S SIGNATURE _____



-----Below for Sanctuary Use Only-----

Received by: _____ Start Date: _____

CONFIDENTIALITY AND NON-DISCLOSURE AGREEMENT

For Value Received, the undersigned, (*print name*) _____ (hereinafter "The Bound Party") hereby understands and agrees as follows:

Whereas, the undersigned is an Employee, Volunteer, Intern, Officer or Director, or other Associate of the Seaside Seabird Sanctuary, LLC, (hereinafter "The Organization") either compensated or non-compensated: who because of the Bound Party's contacts and associations with the Organization may, from time to time, be privy to or have access to the Organization's computer, computer files, paper files and documents, donors information forms and documentation, donors list, personnel information and files, financial files, accountants reports and information, bank statements and checks, asset information of any nature, and any other files, documentation or information (hereinafter "The Information) concerning or related to the Organization; or whereas, the Bound Party may have access to or knowledge of the information which has been either directly or indirectly, learned from, transferred from or discussed with other Bound Parties or with any parties who are not Bound Parties.

1. Bound Party agrees to, and will keep all the information strictly confidential.
2. Bound Party agrees to, and will not move or remove any of the information, in any form from any facility of the Organization.
3. Bound Party agrees to, and will not, transmit, transfer, divulge, talk about, speak about, make available, verbally or in writing by facsimile, electronic or other method, either directly or indirectly, any of the information to any party, firm or entity who is not an Officer or Director of the Organization, nor to any member, associate, employee, reporter or other agent of the print media (newspaper, magazine or periodical industries), television media or radio media except upon the specific orders and direction of any Officer or Director of the Organization. Bound Party understands that dissemination of the information is the sole responsibility of the Officers and Directors of the Organization and that all information provided to the described parties shall be hereinafter made only as an official statement of the Officers and Directors of the Organization.
4. Bound Party understands and agrees that any violation of the terms and conditions of this Confidentiality and Non-Disclosure Agreement by Bound Party may result in immediate termination of the Bound Party's employment or association with the Organization and termination of Bound Party's license to go on or about facilities or properties upon which the Organization operates its business. Said termination shall be within the sole and absolute discretion of the Officers and Directors of the Organization and may be enacted without notice of any kind to the Bound Party.
5. Bound Party understands and agrees that in case of any violation of the terms hereof by Bound Party, the Organization may or is reasonably certain to suffer irreparable damages and harm, the extent of which will be difficult to ascertain in light thereof it is agreed that the Organization is permitted, and may seek if it so chooses, to enforce any judicial remedy available to it under Florida Law including, but not limited to, an action for monetary damages at law or the equitable remedy of injunction.

In Witness Whereof, and in the presence of the witness, I hereunto set my hand and seal this

_____ day of _____, 20_____.

"Bound Party" (*your signature*)

Witness

VOLUNTEER'S WORKER POLICY

(Volunteer Copy)

Thank you for Volunteering:

Volunteers should have an interest in birds and have the ability to work with wild birds and the general public; maintain a mature, professional and responsible attitude at all times; be 18 years of age or older; possess a valid driver's license, state ID or U.S. Passport; sign a confidentiality agreement and Sanctuary release form releasing the Sanctuary of any responsibility for injury or illness; abide by a dress code set by the Sanctuary see below for details. The Sanctuary is a smoke free work environment as well as a drug and alcohol-free workplace. No firearms or weapons of any type permitted; no exceptions will be allowed. Due to the labor-oriented nature of our business, you may be asked to do work where you may possibly get dirty, muddy and/or wet. Your work as a volunteer is important and greatly appreciated.

Your volunteer tenure can be reevaluated and/or terminated at the discretion of the Management at any time.

Volunteer Dress Code (strictly enforced):

1. No sleeveless shirts of any kind are allowed. This includes tank tops, spaghetti strap tops, or strapless tops. You are required to wear a t-shirt at all times.
2. No short shorts permitted.
3. No open-toed shoes of any kind. This includes flip-flops, thongs, and sandals.
4. No swimwear.
5. No feathered hats.
6. No clothing which displays any kind of vulgar or potentially offensive graphics or language.

Volunteers will be sent home, and not be allowed to volunteer on any day where they do not meet our dress code requirements.

Parking:

Parking in a legal fashion may be available along Gulf Blvd., or behind the sanctuary on Sunset blvd.

(Do not block the mailbox or the trash/recycle bins).

Smoking:

Smoking is permitted in the designated areas only.

Food & Drinks:

Any food or drinks brought into the sanctuary by a volunteer must be stored in the employee refrigerator located in the main building breakroom. Volunteers are allowed to have a drink with them inside the hospital as long as it is in a bottle or thermos with a sealable lid. Food is not allowed to be eaten or stored inside the hospital or laboratory.

Personal Belongings:

For security reasons, any personal belongings such as a purse, wallet, backpack, etc. should be secured in the volunteer's vehicle. The Seaside Seabird Sanctuary is not responsible for any lost, stolen, or damaged personal items brought into the Sanctuary by volunteers. The Sanctuary does provide a storage area for personal belongings in the employee/volunteer breakroom for those volunteers who wish to use them.