



INDIVIDUAL VOLUNTEER APPLICATION AND WAIVER

NAME: _____ **PHONE:** _____

ADDRESS: _____

EMAIL: _____ **DATE OF BIRTH:** _____

CURRENT OCCUPATION/EMPLOYER: _____

IF MINOR, PARENT OR GUARDIAN'S NAME: _____

(NOTE: If form is for a minor, a parent or guardian will need to initial and sign the sections on the back)

EMERGENCY CONTACT: _____

EMERGENCY CONTACT PHONE: _____

PLEASE DESCRIBE ANY PAST VOLUNTEER EXPERIENCE:

SKILLS, HOBBIES, AND INTERESTS:

AVAILABILITY - HOW OFTEN WOULD YOU LIKE TO SERVE?

Weekly Monthly Event Other

HAVE YOU EVER BEEN CONVICTED OF A FELONY? Y OR N

SPIRITUALITY - DO YOU ATTEND A BIBLE BELIEVING CHURCH? Y OR N

NAME OF CHURCH AND/OR OTHER AGENCY WHERE YOU VOLUNTEER:

REFERENCE - PLEASE LIST ONE NON-RELATIVE WHO LIVES LOCALLY AND KNOWS YOU WELL

(Name, Phone Number, Email Address, Relation to you):

(Continued on Back)

PENSACOLA DREAM CENTER’S STATEMENT OF FAITH:

- We believe there is one God, eternally existing as Father, Son, and Holy Spirit.
- We believe the Bible to be the inspired, infallible, ultimately authoritative word of God.
- We believe that the Lord Jesus Christ is deity, that He was born of a virgin, that we are redeemed by His atoning death through His shed blood, that He was bodily resurrected and ascended into Heaven, and that He will come again in power and great glory.
- We believe that mankind are saved through a direct, personal encounter with the risen Lord, at which time the Holy Spirit regenerates them. This event we hold to be an experience, rather than a doctrinal supposition.
- We believe in the present ministry of the Holy Spirit, by whom Christ indwells each believer enabling him to live a godly life of obedience as he reaches for maturity.
- We believe the Holy Spirit unites all true believers in the Lord Jesus Christ and that together they form one body, the church.

I acknowledge that I understand that PENSACOLA DREAM CENTER is a faith-based organization.

ADULT/PARENT SIGNATURE OR INITIALS: _____ **DATE:** _____

INDEMNITY AND HOLD HARMLESS:

By submitting this application, I hereby agree to indemnify and hold harmless PENSACOLA DREAM CENTER and 17:28 MINISTRIES, INC. and/or any of its auxiliary or affiliated organizations from any and all claims, suits, causes of action and liability arising out of any claims, suits, or causes of action of any kind which undersigned or his/her child may have from now, hence forward arising out of any actions, activities, or events sponsored by PENSACOLA DREAM CENTER AND 17:28 MINISTRIES, INC. and/or any of its auxiliary or affiliated organizations. This “Indemnity and Hold Harmless” agreement extends to any acts and/or omissions engaged in, by, or attributable to any person or entity, including any agent, employee, volunteer, or board member of PENSACOLA DREAM CENTER and 17:28 MINISTRIES, INC. and/or any of its auxiliary or affiliated organizations. I realize that PENSACOLA DREAM CENTER and 17:28 MINISTRIES, INC. will not be held responsible for any accident, injury, or illness that may occur while I am a volunteer. I also understand and agree that I may ask or be asked to end my volunteer service at any time, for any reason with sufficient notice. I will respect the confidentiality of all client information available to me through my position and maintain a professional relationship with all PENSACOLA DREAM CENTER and 17:28 MINISTRIES, INC. staff and residents while I am a volunteer with this organization.

ADULT/PARENT SIGNATURE OR INITIALS: _____ **DATE:** _____

MEDIA RELEASE:

I hereby irrevocably agree and consent that PENSACOLA DREAM CENTER and 17:28 MINISTRIES, INC. may use all portions of recorded, videotaped, filmed, or photographed images of me or my family for promotion of PENSACOLA DREAM CENTER and 17:28 MINISTRIES, INC. I release all rights to media sources for use and resale by PENSACOLA DREAM CENTER and 17:28 MINISTRIES as stock footage and other paying sources. PENSACOLA DREAM CENTER and 17:28 MINISTRIES, INC. has the right to use pictures, silhouette, and other reproductions of my/my family’s likeness and voice in connection with any advertising material, theatrical distribution, broadcast, television, video, DVD, social media, and the internet.

ADULT/PARENT SIGNATURE OR INITIALS: _____ **DATE:** _____

My signature signifies that I have read and have full knowledge and understanding of all information in this application and process. I have verified this by either signing or initialing each section of this application. I agree to give my full release and support as indicated above.

ADULT/PARENT SIGNATURE: _____ **DATE:** _____