

One Way Out Ministries Dba Second Chance Upscale Resale

VOLUNTEER APPLICATION

NAME

DATE

MAILING ADDRESS		
CELL PHONE	HOME PHONE	
EMAIL		

MONTHS AVAILABLE:	All Year	From	_ to
PLEASE SELECT THE	Monday	Time:	
DAYS/TIMES AVAILABLE:	Tuesday	Time:	_
	Wednesday	Time:	
	Thursday	Time:	
	Friday	Time:	
	Saturday	Time:	

We welcome all Volunteers regardless of experience; however, if you have specific skills/experiences, please indicate below

DCIOW			
OFFICE SKILLS	RETAIL	CREATIVE SKILLS	PROFESSIONAL SERVICES
Computer Proficient	Sorting	Decorating	Counselor
Word	Pricing	Assemble Gift Bags	Financial Guidance
Excel	Furniture Knowledge	Shop for Gifts	Grant Writer
Power Point	Antiques Knowledge	Marketing Skills	Grant Researcher
QuickBooks	Brand Name Knowledge	Graphic Design	Employment Assistance
Mail Merge	Floral Design	Photographer	Tutor
Stuffing Envelopes	Cashier	Videographer	IT Services
Copy CD/DVD's	Qualify Furniture Donations	Organization	MAC Knowledge
Email Blast	Update Craigslist Posting	Internet Research	
Typing	eBay Selling Experience	Internet Sales	HELPS
	Window Display	Social Networking	Child Care
ROYAL TREATMENT	Interior Decorator	Sewing/Repairs	Transportation
Hair Stylist	Furniture Repair		Cleaning
Nail Tech	Electrical Experience	MINISTRY	Errands/Shopping
Masseuse	Plumbing Experience	Intercessory Prayer	Handyman Services
Esthetician	Landscaping	Mentor	Moving/Heavy Lifting
Hostess		Monthly Support	Car Repair
Shampooer		Amount	Special Outreach Worker

LANGUAGES OTHER THEN ENGLISH - Please List:



RELEASE AGREEMENT

I grant One Way Out Ministries, Inc. permission to use my testimonial, photos, and recordings in any area of ministry including but not limited to flyers, newsletters, donation letters, photo display board, website, manuals, television, video presentation, thank you cards.

One Way Ministries, Inc. may have all the rights, title and interest in any and all results and proceeds from said use or appearance. These rights granted are perpetual and include the use of the video, still photography, and/or testimonial in any medium.

I have read the foregoing and fully understand the meaning and affect thereof, and intending to be legally bound, I have signed this release.

I,and signed below.	, agree to my COM	MITMENT AGREEMENT as initialed above
Signature of Director		
Printed Name of Mentee	-	Signature of Mentee
Address		
Phone	– Di	ate



Guidelines for Community Service Workers

Second Chance Upscale Resale is owned and operated by One Way Out Ministries, Inc., a 501c3 non-profit public charity. We welcome and greatly appreciate individuals who have caught the vision of One Way Out and wish to volunteer services to further the ministry.

We would appreciate your reading and signing this document acknowledging your understanding of these guidelines.

- There is no compensation or consideration given to the volunteer as a result of their work for ONE WAY OUT MINISTRIES.
- ONE WAY OUT MINISTRIES retains the right to accept, reject, or terminate the services of any volunteer worker for any reason with no notice required.
- ONE WAY OUT MINISTRIES will supply, on request, a certification of volunteer hours worked for the purpose of reporting to any other agency.
- Volunteer hours worked and mileage driven in a personal vehicle to travel to and from the location where volunteer services are performed may, under certain circumstances, provide a deduction on one's federal tax return. The responsibility for researching and/or claiming such deductions lies with the volunteer and their tax preparer.
- The volunteer will serve only at times and places specified in advance by ONE WAY OUT MINISTRIES.

I have read and understood these guidelines.

Print Name

Signature

Consent to a Background Check

Effective Date: June 22, 2011

In order to protect the welfare of the clients, customers, volunteers, employees, and resources of One Way Out it is the policy of One Way Out to conduct background checks on applicants and volunteers. Background checks include, but are not limited to reference checks, criminal and sex offender checks. Volunteer service or employment is NOT contingent on satisfactory results UNLESS those results are affirmative in child abuse or molestation

It is mandatory for applicants, employees, and volunteers to consent to a background check. One Way Out performs background checks in accordance with the Fair Credit Reporting Act and applicable state and local law.

Any applicant who provides misleading, erroneous or willfully deceptive information to One Way Out on an application form or resume or in an interview will be immediately eliminated from further consideration for a relationship with One Way Out.

This process is necessary to ensure that the individuals selected and retained possess the qualifications required to safely and effectively perform the duties of their position.

I _______ hereby consent to a background check by One Way Out Ministries, Inc. I understand my service is not contingent upon a favorable outcome unless the offense is child abuse/molestation related.

Signature

Date

Date of Birth

Social Security Number

Street Address

City, State, Zip

12873 S. Cleveland Avenue, Fort Myers, FL 33907 Phone: 239-278-1569 Fax: 239-628-1773 www.SecondChanceUpscaleResale.org www. OneWayOut.org



Volunteer Release and Waiver of Liability

This RELEASE AND WAIVER OF LIABILITY (the "Release") executed on this	day of	
20, by	(the "Volunteer") in	
favor of One Way Out Ministries, Inc., dba Second Chance Upscale Resale, a Florida non-profit		
corporation, organized and existing under the laws of the State of Florida, it	s directors, officers,	
employees, volunteers, agents and its successors, and assigns (collectively, '	'One Way Out").	

IN CONSIDERATION OF THE VOLUNTEER BEING ABLE to serve as a volunteer at One Way Out in any activity which would include but not be limited to stocking merchandise; loading & unloading donations; sorting, folding, pricing and hanging clothing; performing basic store maintenance such as cleaning, dusting, organizing: working in the office, and interacting with customers in a professional manner, the undersigned Volunteer does hereby freely, willfully, and without duress, execute this Release and Waiver of Liability under the following terms:

Waiver and Release: Volunteer does hereby release and forever discharge and hold harmless One Way Out and its successors and assigns from any and all liability, claims and demands of whatever kind of nature, either in law or equity, which arise or may hereafter arise from Volunteer's activities with One Way Out. Volunteer understands that this Release discharges One Way Out from any liability or claim that the Volunteer may have against One Way Out with respect to any bodily injuries, personal injuries, illnesses, death or property damage which may result from Volunteer activities with One Way Out whether caused by the negligence action or inaction of One Way Out or its officers, directors, employees or agents or otherwise. Volunteer further understands that One Way Out assumes no responsibility for and is not obligated in any way to provide financial assistance or other assistance including but not limited to medical, health, or disability insurance, in the event of injury, illness, death or property damage.

<u>Medical Treatment</u>: Volunteer does hereby further release and forever discharge, One Way Out from any claim whatsoever which may hereafter arise on account of any first aid, treatment, or service rendered in connection with the Volunteer's activities with One Way Out.

Assumption of Risk: The Volunteer recognizes and understands that the activities with One Way Out may include activities that may be hazardous, including, but not limited to: loading, unloading, pricing and stocking merchandise, working with clothing, furniture, and household items, basic facility maintenance, rearranging furniture, cleaning, and interacting with the public. Volunteer hereby expressly and specifically assumes the risk of injury or harm in these activities and releases and discharges One Way Out from and

waives any and all liability for any injury, illness, death, loss, or property damage resulting from the activities of the Volunteer with One Way Out.

Insurance: The Volunteer understands that One Way Out does not carry or maintain health, medical or disability insurance for its volunteers. All volunteers are expected and encouraged to carry their own personal liability or health insurance.

Other: Volunteer understands that it is their desire to further the work of One Way Out by performing services on their behalf. Volunteer undertakes to perform said services as a volunteer without compensation and that, in performing said services, acknowledges that they are not acting as an employee of One Way Out. Volunteer expressly agrees that this Release is intended to be broad and inclusive as permitted by the laws of the State of Florida. Volunteer agrees that in the event that any clause or provision of this Release shall be held to be invalid by any court of competent jurisdiction, the invalidity of such clause or provision shall not otherwise affect the remaining provisions hereof which shall continue to be enforced.

Volunteer agrees that this Release is binding upon his or her executors, administrators, personal representatives, assigns or next of kin.

IN WITNESS WHEREOF, Volunteer has executed this Release as of the day and year first above written.

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Volunteer: (Please print) _____

(Signature))	

(Date)

Witness: (Please print) _____

(Signature)

(Date) _____

Parent or Guardian:

Date _____

⁽Signature Required if Volunteer is a Minor)