

# Alamo RCD Volunteer Application & Participation Form

(Please print in blue or black ink. Complete one per volunteer.)



**Full Name:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_  
\_\_\_\_\_

**Email address:** \_\_\_\_\_

**Home Phone:** (\_\_\_\_\_) \_\_\_\_\_ **Cell Phone:** (\_\_\_\_\_) \_\_\_\_\_

**Birth Date (Mo/day)** \_\_\_\_\_ **Age at application:** \_\_\_\_\_

**PUBLICATIONS:**

- ✓ Will you allow **photos** of you to be used in publications, web, or social media? \_\_\_**Yes**, \_\_\_**No**.
- ✓ Will you allow your **name to be recognized** in publications, web or social media? (Check all that apply):  
\_\_\_\_\_**Don't Recognize**, \_\_\_\_\_ **First Name**, \_\_\_\_\_ **Last Name**

**Reason for Volunteering: Please respond to all**

- **Helping others**, (How and Why? \_\_\_\_\_)
- **Interest in the work or activity**, (Name the activity: \_\_\_\_\_)
- **Wanted to learn and gain experience**, (Area of study: \_\_\_\_\_)
- **Have Free time**, (Dates and times: \_\_\_\_\_)
- **Skills you bring to us?** (Please list: \_\_\_\_\_)
- **Know someone in Alamo RCD?** (Who recommended us? \_\_\_\_\_)

**Comment:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Liability Release:**

**I, the undersigned, being the Volunteer, agree to RELEASE and DISCHARGE** the Alamo Resource Conservation & Development Area Inc., including their directors, volunteers, agents, aids, contract labor and employees, OF AND FROM ANY AND ALL LIABILITY for, but not limited to, BODILY INJURY, DEATH, and PROPERTY DAMAGE which arises out of or is connected with any program, activity, and assignment that may occur during an activity, or any associated activity. **I also hereby agree to become a Participant in the Alamo RCD Volunteer Program.** I understand that from time to time surveys, questionnaires and interviews will be required of me to be used for data collection and evaluation purposes. All submissions become the property of Alamo RCD and may not be returned. I agree that Alamo RCD may reproduce any written, oral, photo or video taken of me or submitted by me for use by this program as indicated above under **Publications**.

X \_\_\_\_\_  
**(Signature of Volunteer)**

\_\_\_\_\_  
**Date**

**<<<<<<<<<< Please return completed and signed form to: [alamorcd@gmail.com](mailto:alamorcd@gmail.com) >>>>>>>>>>>>>>**  
or mail to Alamo RCD, 215 West Bandera Rd. Ste 114-456, Boerne, Texas 78006  
[www.alamorcd.org](http://www.alamorcd.org)      [www.facebook.com/alamorcd](http://www.facebook.com/alamorcd)