



# PART-TIME LOCAL VOLUNTEER APPLICATION

Heifer International Learning Center at Overlook Farm  
216 Wachusett Street | Rutland, MA 01543-2099  
T: 508.886.2221 | F: 508.886.5038 | Email: overlook.farm@heifer.org | www.heifer.org

DATE TODAY \_\_\_\_\_

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

E-MAIL \_\_\_\_\_ HOME PHONE \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_ GENDER \_\_\_\_\_ CELL PHONE \_\_\_\_\_

If under the age of 16 you are required to come with an adult.

DAYS AND TIMES AVAILABLE:

\_\_\_\_\_

PLEASE SELECT BELOW YOUR TOP **THREE** AREAS OF INTEREST:

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> Chores (eg. feeding animals)  | <input type="checkbox"/> Special Events        | <input type="checkbox"/> Construction                     |
| <input type="checkbox"/> Gardening (seasonal)          | <input type="checkbox"/> Culinary              | <input type="checkbox"/> Maintenance (vehicles / grounds) |
| <input type="checkbox"/> Education (ex. leading tours) | <input type="checkbox"/> Gift Shop             | <input type="checkbox"/> Community Outreach               |
| <input type="checkbox"/> Reception/Office Duties       | <input type="checkbox"/> Special Skills: _____ |   |

Are there any other ways you would like to be involved?

\_\_\_\_\_

Overlook's volunteer program consists of activities ranging from desk work to physical outdoor activities. Prospective participants who are not in good health, who have pre-existing medical conditions, or who have questions about their current state of health should consult with their physician before participating. Consultation with a physician is recommended if you have any of the following conditions: nervous system disorders (epilepsy, seizures, etc.), heart disease, respiratory problems (asthma, emphysema, etc.), back or neck injuries, pregnancy, recent bone or joint injuries, recent surgeries, or judgment-impairing medications.

The staff will take every reasonable precaution to assure participants' safety. However, any outdoor activity includes unforeseeable risks, including poisonous plants, wild or domestic animals, slips and falls, cuts, bruises, sprains, fractures, and exposure to the elements. The undersigned knowingly and voluntarily assumes all risks of injury arising out of, or in connection with, the programs, whether or not such risks are specifically foreseeable, including without limitation the following: Physical Exhaustion, Exposure to Heat or Cold, and the Farm Facilities

In addition, MA WARNING: Under Massachusetts law, an equine professional is not liable for an injury to, or death of, a participant in equine activities resulting from the inherent risks of equine activities, pursuant to section 2D of Chapter 128 of the General Law.

The undersigned covenants that he or she will not sue Heifer Project International or otherwise pursue any claims for any risks or injuries identified in this document or otherwise arising out of the programs. The undersigned agrees to indemnify Heifer International, and provide a defense, against any and all claims for any risks or injury arising out of, or in connection with, the programs.

Further, Heifer Project International is hereby authorized to use the participant's likeness, through the use of, but not limited to photography, video, or film, for future promotional or public relation use, as deemed appropriate and beneficial to Heifer Project International and the undersigned releases any and all claims for compensation or damages for use of such images. Heifer Project International is hereby authorized to use the participants name and address for promotional purposes by Heifer Project International and/or one of its learning centers.

The undersigned hereby certifies that he or she releases any and all rights or claims for damages against Heifer Project International, its employees, agents, and all individuals assisting in instruction and the conducting of programs, from all liability of any nature for any and all injuries, loss, or damage suffered by the undersigned.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_

(required if volunteer is under 18)

Please send back to: Local Volunteer Coordinator, Overlook Farm  
216 Wachusett Street  
Rutland, MA 01543  
Phone: 508-886-2221