



SPECIAL EVENT VOLUNTEER APPLICATION

BASIC INFORMATION

Full Name _____

Primary Phone Number _____ Email Address _____

Mailing Address _____

If Group, please fill out the following information:

Group/Organization (optional) _____

Primary Contact/Group Coordinator Name _____

Primary Contact/Group Coordinator Supervisor's Name _____

Number of Participants _____ Ages of Participants _____ 16-17 _____ 18 and older

Approximate Number of Hours _____

Please indicate the best days and times for your group to volunteer _____

OBJECTIVE OF SERVICE Please check the most applicable objective:

- Service Learning Special Project Educational Team Building

Are there any physical, age, or other limitations that we should consider when assigning a project to your group?

How did you hear about this volunteer opportunity?

NOTE: It is the responsibility of the Group Coordinator to obtain a list of emergency contact information for each participant as well as a signed waiver which must be on file with the Group Coordinator while at Moody Gardens®

AVAILABLE OPPORTUNITIES Please check area(s) below that interest you and/or your group:

- Homeschool Days (Monthly October- April)
 Festival of Lights (November – January)
 Mardi Gras Ball for Special People
 Adaptive Watersports Festival (September)
 Easter in the Gardens
 Art in the Gardens (October)
 Ghostly Gardens (October)
 Other (Please explain) _____

Please note that there are no group opportunities that involve working directly with animals.

GENERAL RELEASE & CONSENT
Special Events Volunteer
Moody Gardens at Galveston Island

I, _____ on behalf of myself, my family, heirs, executors, administrators and assigns, in consideration of being allowed to participate as a Volunteer at Moody Gardens (hereinafter referred to as "Volunteer"), voluntarily agree to release, relinquish rights against, indemnify and hold harmless Moody Gardens, Inc., the Moody Foundation, Gal-Tex Hotel Corporation, The Park Board of Trustees of the City of Galveston, The City of Galveston and each of their respective agents, present or former corporate parents, subsidiaries, affiliates, divisions, groups, owners, partners, officers, directors, shareholders, agents, attorneys, insurers, employers, employees, volunteers, trustees, servants, representatives, successors, and assigns (hereafter collectively referred to as the "Released Parties") from any and all claims, including any claims for harm, personal injuries, death or other damages, whether foreseen or unforeseen, to me or my family, heirs, executors, administrators or assigns, whether caused by my, the Released Parties', or another Volunteer's negligent or intentional acts or omissions, arising out of my participation as a Volunteer, and any activities incidental thereto, whenever or however the injuries may occur and for whatever period my participation and activities may continue.

IT IS MY INTENTION BY THIS INSTRUMENT TO EXPRESSLY EXEMPT AND RELEASE THE RELEASED PARTIES FROM ALL LIABILITY WHATSOEVER FOR ANY HARM, PERSONAL INJURY, PROPERTY DAMAGE OR WRONGFUL DEATH CAUSED ME REGARDLESS OF WHETHER OR NOT SUCH INJURY IS CAUSED SOLELY BY THE NEGLIGENT ACT OR OMISSION OF ONE OR MORE OF THE RELEASED PARTIES.

I assume all risks in connection with said activity for any harm, injury or damage, which may befall me, including death, arising out of my participation as a Volunteer. I understand that participating as a Volunteer involves certain risks including, without limitation, exposure to wild and potentially dangerous animals, birds, fish, insects and/or plants, and drowning. I further understand that participating as a Volunteer requires me and other Volunteers to work with sharp instruments and/or special equipment, which can cause serious bodily injury or death. **I HEREBY AGREE TO ASSUME SUCH RISKS. I REPRESENT AND WARRANT THAT:** (1) I have been appraised of the dangers involved with participation as a Volunteer; (2) I do not have any physical or mental condition that would impede my safety while participating as a Volunteer; (3) Released Parties have made no express or implied representations, promises or statements regarding the quality or safety of any aspect of my participation as a Volunteer; (4) in executing this release, I am not relying on any express or implied representations, promises or statements made by Released Parties; (5) my participation as a Volunteer is the sole and sufficient consideration for this release; (6) I am of lawful age and legally competent to sign this release or have acquired the consent of my parents or guardians; and (7) I have had the opportunity to discuss the consequences of this release with an attorney and, I am either relying solely on that advice or I am satisfied with my decision not to seek such advice. I hereby acknowledge and understand that the Released Parties are relying on the truth of the foregoing representations in allowing me to participate as a Volunteer.

I have read this document and fully understand that this is a valid and legally binding release and that the Released Parties may not be held liable in any way for my injuries resulting from my participation as a Volunteer that may result in injury, death or other damages to me or my family, heirs, executors, administrators, or assigns. I am not under the influence of alcohol or drugs and I execute this release voluntarily, with full knowledge of its significance.

I UNDERSTAND THAT THE TERMS OF THIS RELEASE ARE CONTRACTUAL AND NOT A MERE RECITAL AND THAT I HAVE SIGNED THIS RELEASE AS MY OWN FREE ACT.

Name: _____
Mailing Address: _____ City _____ ST _____ Zip _____
Primary Contact Phone Number: _____ Email Address: _____
Signature: _____ Date: _____

Special Event Volunteer Policy

Please make sure you have read and understand the following:

- Volunteers must be at least 16 years old, be willing to work a full assigned shift, and enjoy working in a fun family environment.

-For volunteers under the age of 18 you must provide a 1:5 adult to youth ratio. Adults are expected to supervise and keep the group on task.

-Special Event Volunteers must identify a Group Coordinator that is responsible for the safety and well being of the group members:

1. To provide coordination and supervision for the group while volunteering
2. To ensure all members adhere to Moody Gardens[®] policies and procedures

-It is the responsibility of the Group Coordinator to obtain a signed parental consent form for the group members under the age of 18 (please request form from the Volunteer Coordinator), which must be turned in to the Volunteer Coordinator on or before the date of service.

- It is the responsibility of the Group Coordinator to obtain emergency contact information for each participant, which must be on file with the Group Coordinator while at Moody Gardens[®].

-Please inform the Volunteer Coordinator if any members cancel before the assigned volunteer date.

-Moody Gardens[®] cannot guarantee volunteer placement. Moody Gardens[®] will, however, make every effort to match volunteer applicants to volunteer opportunities based on the needs of Moody Gardens[®] and the interests and abilities of the volunteer.

Signature of Applicant _____ Date _____

Please return completed application to:

Moody Gardens[®]
Attn: Volunteer Services
One Hope Boulevard
Galveston, TX 77554