



KULANU VOLUNTEER SHADOW
***Sunday Club* Volunteer Application 2015-16**

Volunteer's Name (First & Last): _____

Date of Birth: _____ Gender: (Circle) M F

Street Address: _____

City: _____ Zip: _____

Home Phone number: () _____ Cell Phone Number: () _____

Volunteer's email: _____

Current School: _____

Mother's Name: _____ Cell: _____ Email: _____

Father's Name: _____ Cell: _____ Email: _____

Emergency Contact Person: _____ Cell: _____

Relationship to applicant: _____

Any medical concern(s) please list here- include food and environmental allergies:

Have you volunteered for Kulanu before? ____ yes ____ no

If Yes, when & what program _____

What skills, training, or knowledge do you have that will be a contribution to the individuals you will be working with?

For Kulanu Staff:
Reviewed by: _____

Date: _____

PARENTS AND VOLUNTEERS: PLEASE READ AND SIGN BELOW

Title: *Sunday Club* Program Volunteer

Responsibilities:

- If you are assigned to someone who is your age, be a role model, help them with their project, have conversation with them and keep them focused on the activity you're attending.
- If you are assigned to work with a younger child and their peer pal, encourage them to work together, share materials and allow both children to participate in the activity.
- Assist with clean-up after each activity.
- Any time you wish to leave an activity (with or without your participant) you must inform your Group Leader. **NO CHILD CAN BE LEFT ALONE.**
- You must inform the Group Leader or Nicole Callan, Assistant Director, of all incidents or injuries.
- IF YOU ARE ILL OR CANNOT ATTEND: Please inform Nicole, Assistant Director, (via email at nicole@kulanukids.org or telephone (516-282-4654) *if possible, prior to Sunday.*
- For the safety and protection of the identity of each participant, taking pictures or videos, or talking about the participants to anyone outside of the program is prohibited.
- No cell phones or electronic devices are permitted during the program. If you need to contact someone, you can do so at the end of the session or ask permission from the Group Leader. Should there be an emergency, you can seek Nicole Callan who can facilitate a phone call.
- Wear appropriate clothing each week.
 - Wear your Kulanu T shirt every week (no tank tops or sleeveless tops)
 - Skirts must be knee-length
 - Shorts must be mid-thigh length or longer

I, _____, understand my responsibilities as a volunteer at Kulanu *Sunday Club* and agree to serve as a volunteer at the discretion of Kulanu and to abide by the responsibilities listed above.

I give my consent to provide my name, voice, and photograph and film of myself to the media for advertising, programming or promotional activities for the Kulanu Sunday Activities Program.

Applicant Signature: _____ Date: _____

Parent Signature: _____ Date: _____

****Parent signature required if participant in under the age of 18.***