



German International School

GIS – Summer Volunteer Application

Please complete and return to

German International School of Portland

3900 SW Murray Blvd, Beaverton, OR 97005

Telephone: 503.626.9089, Facsimile: 503.626.9730

E-Mail: Ashley.Parsons@gspdx.org

Age requirements: Entering 7th grade through College Senior

Thank you for your interest in volunteering at the German International School. Volunteers are an integral part of our summer program. Please complete this application and return it to the school. You will receive an email confirmation upon receipt.

Name: _____ Age: _____ Birth Date: _____ Sex: M F

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Alternate Phone: _____ Email: _____

Grade (Fall 2015): _____ School: _____

Languages spoken and number of years studied: _____

How did you hear about us? _____

What are your general interests? _____

Why do you want to volunteer at GIS? _____

Have you had any previous experience as a volunteer? If so, with what organizations and what kind of work did you do? _____

What did you like best & least of these previous experiences? _____

What do you hope to gain from being a volunteer? _____

Availability: Summer Camp sessions are scheduled 9 am – 3 pm, Monday through Friday.

Check here if available for all sessions

OR

Check weeks you are available:

7/10-7/14 7/17-7/21 7/24-7/28 7/31-8/4 8/7-8/11

8/14-8/18 8/21-8/25

How will arrive/depart from the school (please circle): Car Public Transportation Bike

Do you have any special needs or restrictions we should be aware of? _____

Emergency Contact _____ Phone _____

Volunteers are expected to:

- Attend all days as scheduled
- Be prompt
- Be courteous and respectful
- Bring enthusiasm and energy
- Be willing to complete a variety of tasks
- Ask the teacher how you can help
- Follow instructions provided by the teacher
- Help students participate in activities
- Demonstrate appropriate behavior

Volunteers may not:

- Be left alone with students
- Discipline students
- Text or make/receive personal phone calls other than during breaks

I have reviewed, understand and agree to abide by the Volunteer Expectations.

Volunteer Signature

Date

My child has permission to participate in all program activities. I hereby request and authorize any physician, hospital or health care provider to administer medical treatment promptly, whether or not I may be contacted and informed. I am the parent or legal guardian of the above named child participating in the GIS programs. I hereby release, waive and discharge GIS, and all of its instructors, employees, officers, directors, agents and volunteers from any and all liability to me, to my child and to all my legal representatives, assigns, heirs, and next of kin for damage and injury to my child or to any person or property arising out of participating in the program, whether on GIS premises or elsewhere. This agreement includes, but is not limited to claims or demands on account of injury or damage caused or allegedly caused by negligence of GIS or any individual named above. My child may be photographed for publicity purposes. I understand that my child is to be picked up by 3:15 pm daily. If my child is not picked up by that time, I am responsible for a late fee billed at \$1/per minute.

Parent/Guardian Signature
(Required if volunteer under 18)

Date

I hereby request and authorize any physician, hospital or health care provider to administer medical treatment promptly, whether or not I may be informed. I hereby release, waive and discharge GIS, and all of its instructors, employees, officers, directors, agents and volunteers from any and all liability to me and to all my legal representatives, assigns, heirs, and next of kin for damage and injury to me or to any person or property arising out of participating in the program, whether on GIS premises or elsewhere. This agreement includes, but is not limited to claims or demands on account of injury or damage caused or allegedly caused by negligence of GIS or any individual named above. I may be photographed for publicity purposes.

Volunteer Signature **(if 18 or over)**

Date