



American Red Cross

**Greater Houston Area Chapter
American Red Cross
Youth Volunteer Application Form**

Please check: New Member Existing Member

Please Print Legibly

Date of birth ____/____/____ Sex: Male Female
Last Name _____ First Name _____ Middle Name _____
Home Address _____ City _____
County _____ State _____ Zip Code _____ Home Phone (____) _____
Email _____ Cell Phone (____) _____

Emergency Data

In case of emergency, notify: Mother Father Guardian
Parent(s) or Guardian Name(s) _____
Phone _____ Cell/Pager _____

Education

Name of School	Current Grade Level	Name of Red Cross Club
_____	_____	_____

Positions and dates held within Club: _____

Statistical Data

Volunteers are considered for all positions without regard to race, color, religion, gender, national origin, age, marital or veteran status, medical condition or disabilities. The following information is used only to develop a complete record of our programs. Completion is optional, although it is very useful to the organization.

Ethnicity: American Indian/Alaskan Native Asian (not Hispanic or Latino) Black or African American
 Hispanic Native Hawaiian/Other Pacific Isl. Two or more races White (not Hispanic or Latino)
 Other _____

****Date Orientation taken:** ____ / ____ / ____ **Given by:** _____
Dues Paid: _____ **Club Shirt Paid:** _____

OVS USE ONLY:

HCMS ID: _____ **HCMS Entry Date:** ____ / ____ / ____ **By:** _____
Job: Club Member (V00011) **Dept:** Youth Services (D90000) **Office:** _____

Personal References

List two persons, other than family, who know your qualifications, one of them may be the club sponsor, with the school address. These references may be checked.

Name _____

Name: _____

Address _____

Address: _____

Phone _____

Phone _____

Statements of Understanding and Code of Conduct Certification

I understand that this is a volunteer position and not a contract of employment. I further agree that as a Red Cross volunteer, I may not accept payment for my services, and unless otherwise stated, I am responsible for the cost of uniforms, transportation, and any other expenses (tolls, parking fees, meals, etc.) I may incur while volunteering.

As a volunteer I agree to abide by all rules and regulations of the organization and will take required training where applicable. I further release all parties from liability for any damage that may result from furnishing information to you.

As a condition of considering this application, I will sign necessary documents to release any information maintained by local, state or federal agencies. In addition, I authorize verification of applicable licenses required for my volunteer assignment. The statements made on this application are complete and accurate.

I understand that any misrepresentation, omission of information, or misleading and incomplete data shall result in disqualification from consideration or dismissal as a volunteer.

I certify that I have read and understand the Code of Conduct of the American Red Cross and agree to comply with it. I affirm that, except as listed below, I have no financial interest or affiliation with any organization which may have interests that conflict with, or appear to conflict with, the best interests of the American Red Cross. Should such conflicts or apparent conflicts arise in connection with the affiliations listed below, I agree to refrain from participating in any deliberations, decisions or voting related to the matter.

I also agree, during the term of my affiliation with the American Red Cross, to report promptly to the Chairman of my unit, or his/her designee, any future situation that involves, or might appear to involve, me in any conflict with the best interests of the American Red Cross.

Volunteer Signature _____ Date _____

PERMISSION TO BE PHOTOGRAPHED

I give Greater Houston Area Chapter of the American Red Cross the right to interview and/or take photographs, audio-visual recordings of my child to be used in promotional, educational or fundraising materials including, but not limited to videotapes, pamphlets, and brochures. I understand that my child's name may be used in connection with these materials. This release is voluntary, and I give it in the interest of public information, education, the furtherance of the goals of this institution, or other lawful purposes. I acknowledge that I have legal authority to sign this form on behalf of the name mentioned above.

Parent/Guardian's Signature _____ Date _____

LIMITED CONSENT

I **do not** wish my child to be photographed, recorded on audio tape, videotape, and/or film **except** for the photograph that is shared with all campers and Staff.

Parent/Guardian's Signature _____ Date _____

Informed Consent & Release of Liability

American Red Cross

(This completed form is **required** for participants under the age of 18)

NAME: (Please Print) _____ PHONE #: _____

ADDRESS: _____

SCHOOL: _____ GRADE: _____

PARENT INFORMATION

NAME: (Please Print) _____ HOME PHONE #: _____ WORK PHONE: _____

I, _____ Parent [] Legal Guardian [] and the undersigned, give my permission for my

son/daughter _____ to participate as a Red Cross Volunteer for all **Red Cross Student Club activities**. In the event that I cannot be reached, I hereby grant permission for my son/daughter to be evaluated, diagnosed, treated, and/or medicated in accordance with standard medical practice by licensed medical personnel. I hereby release **Greater Houston Area Chapter** from liability for injuries or damages arising or resulting from participation in Red Cross events/activities. I will not hold the school sponsor and/or American Red Cross representative(s) associated with Red Cross Club activities responsible in the event of injury. Furthermore, I agree to accept any and all financial responsibilities as a result of scheduling such treatment.

My child agrees to abide by all rules, regulations and codes of conduct as outlined by **Greater Houston Area Chapter** and the American Red Cross. I understand that the American Red Cross will not be held liable if my child fails to cooperate with said regulations and that any infractions of the rules may result in immediate event dismissal and transportation home at parent/guardian's expense.

Parent or Legal Guardian Signature

Date

PHOTO RELEASE:

Permission is hereby granted to The American Red Cross to use the photographs and quotation of my son/daughter to assist in the community awareness, educational efforts, and related public relations purposes that may include brochures, posters, website and print media from Red Cross events/activities.

Parent or Legal Guardian Signature

Date

YOUTH:

As a participant of the **Red Cross Student Clubs**, I understand and agree to abide by all rules, regulations and codes of conduct as outlined by **GHAC**. I also understand and agree to notify my parents or legal guardian at the time of any infractions requiring my dismissal from **Red Cross student Club Activities** and that I will be sent home at my own and/or my parent/guardian's expense.

Youth Signature

Date

MEDICAL INFORMATION (Please Print)

Emergency Phone Number: _____

My child is allergic to (medication/food/other): _____

My child must take the following medication (including dosage, frequency, etc.): _____

You should be aware of these special medical conditions or needs of my child (dietary, asthma, etc.): _____

Please provide all necessary information about your insurance (Company name and Policy #) _____

PROCESSING

- Step 1: Guardians should return this form to the Chapter Representative
- Step 2: A copy of this form must be kept on file at the Chapter/Unit of origin
- Step 3: The original must be given to the Chaperone and be kept with them at all times
- Step 4: A copy must be given to the youth delegate and be on hand at each event

Acknowledgement and Receipt

(Volunteer Handbook)

[Receipt and review of policies form](#)

Signature on this receipt acknowledges that you have reviewed the Greater Houston Area Chapter volunteer handbook. Please sign and date the receipt.

Volunteer Handbook Statement of Certification

I, _____, certify that I have received and reviewed the Greater Houston Area Chapter of the American Red Cross Volunteer Handbook.

I further understand that, by signing this statement as required I am indicating that I have read the Volunteer Handbook and understand its contents, or have discussed questions I have with the Office of Volunteer Services. I also realize that this statement will become a permanent part of my volunteer personnel file.

Volunteer's Name (Please Print)

Signature

Address

City, State, Zip

Date

*Please return to:
American Red Cross
Greater Houston Area Chapter
Office of Volunteer Services
2700 Southwest Freeway
Houston, Texas 77098

CONFIDENTIAL INFORMATION AND INTELLECTUAL PROPERTY AGREEMENT

For All Volunteers

This Confidential Information and Intellectual Property Agreement ("Agreement") is made as of the date of signature below ("Effective Date"), by and between THE AMERICAN NATIONAL RED CROSS, including all chartered units ("Red Cross"), and the undersigned ("I," "me" or "my").

Reasons for Agreement

I desire to volunteer or to continue to volunteer with the Red Cross. I acknowledge that I may, in the course of my service to the Red Cross ("Volunteer Service"), have access to or create (alone or with others) confidential and/or proprietary information and intellectual property that is of value to Red Cross. I understand that this makes my position one of trust and confidence. I understand Red Cross' need to limit disclosure and use of confidential and/or proprietary information and intellectual property. I understand that all restrictions are for the purpose of enabling Red Cross to fulfill its humanitarian mission, to maintain donors, customers and clients, to develop and maintain new or unique products and processes, to protect the integrity and future of Red Cross and to protect the employment and volunteer opportunities of the Red Cross. THEREFORE, I agree to the following:

1. Definitions.

"Confidential Information" shall include but not be limited to:

- (i) information relating to Red Cross' financial, regulatory, personnel or operational matters,
- (ii) information relating to Red Cross clients, customers, beneficiaries, suppliers, donors (blood and financial), employees, volunteers, sponsors or business associates and partners,
- (iii) trade secrets, know-how, inventions, discoveries, techniques, processes, methods, formulae, ideas, technical data and specifications, testing methods, research and development activities, computer programs and designs,
- (iv) contracts, product plans, sales and marketing plans, business plans and
- (v) all information not generally known outside of Red Cross regarding Red Cross and its business, regardless of whether such information is in written, oral, electronic, digital or other form and regardless of whether the information originates from Red Cross or Red Cross' agents.

"Intellectual Property" shall include but not be limited to:

- (i) all inventions, discoveries, techniques, processes, methods, formulae, ideas, technical data and specifications, testing methods, research and development activities, computer programs and designs (including improvements and enhancements and regardless of patentability),
- (ii) trade secrets and know-how,
- (iii) all copyrightable material that is conceived, developed, or made by me, alone or with others,
- (iv) trademarks and service marks and
- (v) all other intellectual property.

Intellectual Property shall include any intellectual property created by me:

- (i) in the course of Volunteer Service or using Red Cross time, equipment, information or materials, and
- (ii) within one (1) year after termination of Volunteer Service and relating directly to work done during Volunteer Service.

Intellectual Property may be in any form, including but not limited to written, oral, electronic, digital or other form.

2. Obligation of Confidentiality. Except as may be required for the performance of my duties during Volunteer Service, or unless specifically authorized in writing by Red Cross, I shall not use or disclose, for my or for others' benefit, either during or after Volunteer Service, any Confidential Information.

3. Disclosure and Ownership of Intellectual Property. I (i) shall promptly and fully disclose to Red Cross any and all Intellectual Property, (ii) agree that all Intellectual Property shall be owned by Red Cross, (iii) agree to and do hereby assign, transfer and convey to Red Cross the entire right, title and interest in and to all Intellectual Property, (iv) will execute and deliver any and all documents, take all actions and render any and all assistance reasonably requested by Red Cross, during or at any time after Volunteer Service, to establish Red Cross' ownership of, or to enable Red Cross to obtain patents to or register copyrights of, any Intellectual Property, and (v) acknowledge that all Intellectual Property that is copyrightable subject matter and that qualifies as a "work made for hire" shall be automatically owned by Red Cross. In the event Red Cross is unable for any reason whatsoever to secure my signature to any document required to apply for or execute any patent, copyright, or other applications with respect to Intellectual Property, I hereby irrevocably appoint Red Cross and its authorized officers and agents as my agents and attorneys-in-fact to execute and file any such application and to do all other acts to further the prosecution and issuance of patents, copyrights, or other rights with respect to Intellectual Property with the same legal force and effect as if executed by me. *As a reminder, Intellectual Property shall only include intellectual property created by me (i) in the course of Volunteer Service or using Red Cross time, equipment, information or materials, and (ii) within one (1) year after termination of Volunteer Service and relating directly to work done during Volunteer Service.*

4. Ownership and Return of Material. All materials, including but not limited to business information, files, research, records, memoranda, books, lists, computer disks, hardware, software, cell phones and other wireless devices, documents, drawings, models, apparatus, sketches, designs and any other embodiment of Confidential Information or Intellectual Property received by me during Volunteer Service, and any tangible embodiments of such materials created by me, alone or with others, whether confidential or not, are the property of Red Cross. I shall return to Red Cross all such materials, including copies thereof, in my possession or under my control upon termination of Volunteer Service for whatever reason or upon the request of Red Cross. The return of such materials shall take place within twenty-four (24) hours of notice of termination or upon request of Red Cross, whichever comes first.

5. Survival of Obligations and Enforcement. The obligations that I have under this Agreement shall survive the termination of Volunteer Service, regardless of the reasons or method of termination. I agree that Red Cross shall be entitled to recover from me all attorneys' fees incurred in enforcing Red Cross' rights under this Agreement.

I represent that the above restrictions are necessary to protect Red Cross' legitimate interests, and that these restrictions will not prevent me from earning a livelihood.

VOLUNTEER

Signature

Volunteer ID Number

Printed Name

Department or Division

Title



Greater Houston Area Chapter American Red Cross Introduction to Disaster Form

Take the basic class in 45 minutes

Introduction to Disaster, the foundation class for all disaster training can now be taken on-line in about 45 minutes.

The self-study course will introduce learners to American Red Cross Disaster Services and allow them to discover how volunteers support this critical mission and to explore ways they can become involved in a local chapter.

http://www.redcross.org/flash/course01_v01/

NOTE: Requires Flash Multimedia Player

I certify that I have viewed the **On-line Disaster Introduction Class**.

Please Print

School Name:	
First / Last Name:	
Address:	
City, State, zip code:	
Phone Number:	
Email Address:	
Title:	Officer: _____ / Member

Please sign below:

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Return to:

Youth Services
American Red Cross
Greater Houston Area Chapter
2700 Southwest Freeway
Houston, TX 77098