

Children's Museum of Stockton  
Trunk or Treat on Weber Street  
Sunday October 23, 2022 11am-2pm  
Volunteer Application



Thank you for your interest in volunteering at the Children's Museum of Stockton. As a non-profit organization we appreciate our volunteers as a valuable resource to continue the Museum's mission of providing a safe, fun and educational facility for the children in our community. We are seeking volunteers to assist us with our fourth annual "Indoor Trunk or Treat on Weber Street" at the Children's Museum of Stockton, Sunday October 23, 2022 from 11am to 2pm. Our goal is to provide a family friendly event to celebrate Halloween by including community organizations to further promote their services and opportunities. We are inviting local organizations to participate in this free event for the community. We are anticipating between 500 and 1,000 children to attend this event. We hope this event will give our visitors more awareness about the great organizations and services our community has to offer. We are anticipating a large crowd and could use your help!

Name: \_\_\_\_\_ Over 18? Y / N Age if under 18: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: (Home): \_\_\_\_\_ Cell: \_\_\_\_\_

E-mail: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_

Name

Relationship

Emergency Contact Telephone: \_\_\_\_\_

Are you volunteering for school community service hours? \_\_\_\_\_

Name of School: \_\_\_\_\_ Grade: \_\_\_\_\_

**I am interested in volunteering for the following positions: We will do our best to accommodate the positions requested.**

- Providing a Trunk or booth (please complete vendor application)
- Passing out candy, giveaways, materials to visitors (may be assisting other vendors at their booths)
- Set up and/or tear down (helping staff and vendors set up or tear down tables, decorations etc.)

ALSO: • Candy Donations: We are seeking donations of candy to pass out to the children.

## EMERGENCY MEDICAL FORM

I hereby agree to indemnify and hold harmless the Children's Museum of Stockton and any of their employees from any liability, claim or action for damages or injury resulting from, or in any way arising out of volunteering at or for the Children's Museum of Stockton.

**Hold Harmless: Applicant agrees to hold the Children's Museum of Stockton, its governing bodies, the individual members thereof and all employees of various jurisdictions, free and harmless from any loss, damage, liability, cost, or expenses that may arise during or be caused in any way by such use or occupancy of the property. The user agrees to furnish such liability or other insurance for the protection of the public and participants. I the undersigned, hereby certify that I will be personally responsible on behalf of the applicant for any damage sustained by the building, furniture, or equipment, by the applicant. All the facilities are to be left in a neat and clean order. I authorize the Children's Museum of Stockton to use a photograph or image of this event in any future advertisement or promotion of the Children's Museum of Stockton. I hereby certify that I will abide by the rules and regulations of the Children's Museum of Stockton. And I will conform to all applicable provisions and laws of the State of California**

Upon returning this form, I immediately consent to the use of my name, likeness and photo for use in all manners by the Children's Museum of Stockton staff, including displays, newsletters, brochures, or any other lawful purposes.

I agree to represent the Children's Museum of Stockton in a manner that is in line with the organizations' Standards of Conduct.

Volunteer Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/guardian Name (If volunteer is under 18): \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Phone Number: \_\_\_\_\_