



Lobs & Lessons is a youth enrichment program that strengthens life skills, promotes academics, and creates a path to higher education through the sport of tennis. Your experience will begin when you complete this application.

Name: \_\_\_\_\_ Date of Birth (optional): \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Are you currently employed?  Yes  No If yes, where? \_\_\_\_\_

Are you enrolled in school?  Yes  No If so, where? \_\_\_\_\_

What type of student are you:  Undergraduate  Graduate  Doctoral  Medical

Area of study: \_\_\_\_\_

Graduation Date: \_\_\_\_\_

Do you have internship or service learning hours to complete?  Yes How many? \_\_\_\_\_  No

If yes, please state the name of your class and your professor's name: \_\_\_\_\_

Do you have any health requirements/medical conditions that might impact your ability to volunteer?

Yes  No If yes, please explain: \_\_\_\_\_

Do you take any medications on doctor's orders?  Yes  No If yes, please explain: \_\_\_\_\_

Do you have any allergies (food, bee stings, environmental, medicines)?  Yes  No

If yes, please explain: \_\_\_\_\_

Why do you want to volunteer for Lobs & Lessons? \_\_\_\_\_

Do you have any skills or talents that you would like to share with Lobs & Lessons? (i.e. graphic design, tennis, special event coordination, technology, marketing, visual/performing arts, etc...)

If you play or did play sports in high school or college, please list them and explain? \_\_\_\_\_

In case of emergency, whom shall we call?

1. Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Relation: \_\_\_\_\_  
2. Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Relation: \_\_\_\_\_

Please provide two references:

1. Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Relation: \_\_\_\_\_  
2. Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Relation: \_\_\_\_\_

**Volunteer Opportunities:** Check all that interest you!

- Life Skills Presenter- Teach a lesson from our curriculum or one of your own.  
 Guest Speaker- Share knowledge about your work that relates to life skills or future orientation  
 Tennis Instructor- Assist staff on the court by leading tennis drills, stations and games.  
 Tennis Coach- Coach Jr. Team tennis for one of our elementary or middle school teams.  
 Special Events- Assist staff with coordination, preparation or day of event.  
 Summer Camp- Assist staff with tennis, team building games and camp activities.  
 Other: \_\_\_\_\_

**Availability:** Please place a check mark in the corresponding boxes. If your availability does not match the exact time, please write your available time in the box.

Time/Day	Monday	Tuesday	Wednesday	Thursday	Friday
3:30-4:00pm					
4:00-4:30pm					
4:30-5:00pm					
5:00-5:30pm					
5:30-6:00pm					
6:00-6:30pm					

Which age group do you prefer?  Elementary School  Middle School  Either

Do you have transportation?  Yes  No

**OPTIONAL** information used for statistical purposes:

- Ethnicity:  African American  White  Native American  Latino  Asian/Pacific Islander  Other  
Gender:  Female  Male

**Process:**

- 1) Download & read the DCE Youth Programs Manual-you will be asked to sign off on this document
- 2) Complete the Volunteer Application, Guidelines & Procedures Release, Statement of Disclosure, and Release of Liability (please print front-to-back)
- 3) Submit completed forms: 1) email [ccarter@vcu.edu](mailto:ccarter@vcu.edu) 2) drop off at the MFYC (120 S. Linden Street) 3) fax 827-1739 or 4) mail to: PO Box 843062, Richmond, VA 23284-3062.
- 4) Attend a Volunteer Training and complete the on-line Safety and Protection of Minors, Tier III training (<http://www.mfyc.vcu.edu/youth-on-campus/training-/>).

**THANK YOU** for your interest in volunteering with Lobs & Lessons!



**VOLUNTEER GUIDELINES AND PROCEDURES RELEASE**

Lobs & Lessons  
Division of Community Engagement Youth Programs

I have read the Division of Community Engagement Youth Programs Volunteer Manual. I have read the entire contents of the manual and understand all of the guidelines and procedures within.

I will be liable for any misdeeds, improper conduct and failure to abide by other guidelines or procedures in this manual.

\_\_\_\_\_  
Volunteer Printed Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Volunteer Signature



**VOLUNTEER STATEMENT OF DISCOLSURE**

Lobs & Lessons  
Division of Community Engagement Youth Programs

As a volunteer with the VCU's Division of Community Engagement Youth Programs who will work in direct contact with students:

I certify that I (i) have not been convicted of a felony or any offense involving the sexual molestation or physical or sexual abuse or rape of a child, (ii) have not been convicted of a crime of moral turpitude, and (iii) have an obligation to report any charges if they occur during my participation in the program.

I understand that if these statements are found to be false that I will be guilty of a Class I misdemeanor and will be prosecuted to the full extent of the law. Further, I will be immediately removed and banned from further volunteering with any VCU Division of Community Engagement Youth Program.

\_\_\_\_\_  
Volunteer Printed Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Volunteer Signature



## VOLUNTEER RELEASE OF LIABILITY

Lobs & Lessons

Division of Community Engagement Youth Programs

The Volunteer desires to work as a volunteer for Lobs & Lessons one of the Division of Community Engagement (DCE) youth programs located on the Virginia Commonwealth University (VCU) campus and engage in the activities related to being a volunteer (the “Activities”). The Volunteer hereby freely, voluntarily, and without duress executes this Release under the following terms:

**Release and Waiver.** Volunteer does hereby release and forever discharge and hold harmless VCU and its officers, employees and agents from any and all liability or claims, of whatever kind or nature, which result from Volunteer’s Activities with the DCE. Volunteer understands that this release discharges VCU and its officers, employees and agents from any liability or claim that the Volunteer may have against VCU and its officers, employees and agents with respect to any bodily injury, personal injury, illness, death, or property damage that may result from Volunteer’s Activities with the DCE youth program, whether caused by negligence of VCU or its officers, directors, employees, or agents or otherwise. Volunteer also understands that VCU and its officers, employees and agents does not assume any responsibility for or obligation to provide financial assistance or other assistance, including but not limited to medical, health, or disability insurance in the event of injury or illness.

**Medical Treatment.** Volunteer does hereby release and forever discharge VCU and its officers, employees and agents from any claim whatsoever which arises or may hereafter arise on account of any first aid, medical treatment, or service rendered in connection with the Volunteer’s Activities with the DCE youth program.

**Assumption of Risk.** The Volunteer understands that the Activities may include work that may be hazardous to the Volunteer. Volunteer hereby expressly and specifically assumes the risk of injury or harm in the Activities and releases VCU and its officers, employees and agents from all liability for injury, illness, death, or property damage, loss, or theft resulting from the Activities.

**Insurance.** The Volunteer understands that, except as otherwise agreed to by VCU in writing. VCU does not carry or maintain health, medical, or disability insurance coverage for any Volunteer. Each Volunteer is expected and encouraged to obtain his or her own medical or health insurance coverage.

**Photographic Release.** Volunteer does hereby grant and convey unto VCU all rights, titles and interests in any and all photographic images and video or audio recordings made by the DCE youth program during the Volunteer’s Activities with VCU, including, but not limited to, any royalties, proceeds, or other benefits derived from such photographs or recordings.

**Other.** Volunteer expressly agrees that this Release is intended to be as broad and inclusive as permitted by the laws of the Commonwealth of Virginia, and that this Release shall be governed by and interpreted in accordance with the laws of the Commonwealth of Virginia. Volunteer agrees that in the event that any clause or provision of this Release is deemed invalid, the enforceability of the remaining provisions of this Release shall not be affected.

By signing below, I express my understanding and intent to enter into this Release and Waiver of Liability willingly and voluntarily.

\_\_\_\_\_  
Volunteer Printed Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Volunteer Signature