**LANDMARK SOCIETY - 2020 VOLUNTEER INFORMATION**

If printing out and filling by hand, kindly print – or follow instructions at the end for emailing.

TITLE\_\_\_\_\_\_\_ NAME\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

STREET ADDRESS\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

CITY/TOWN\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ZIP CODE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

HOME PHONE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_CELL PHONE\_\_\_\_\_\_\_\_\_\_\_ WORK PHONE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

EMAIL\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Is the above information year round, or do you have a seasonal address? If yes, check here and please enclose your secondary address and the months it is in effect\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_Please list me as an active volunteer for 2020 opportunities *(please complete the form)*

When are you *generally* available? (check all that apply): \_\_\_\_Weekdays \_\_\_\_\_Weeknights \_\_\_\_Weekend days \_\_\_\_\_\_\_Weekend Nights

What jobs or events have you done – what would you like to do or learn more about?

Have Done Would Like to Do, Tell Me More

**Stone-Tolan House Historic Site Interpreter (docent)** € €

Conduct tours for school groups or adults

Training provided. Commitment: tours

April – Oct, average 1 to 2 a month.

**Ellwanger or Stone-Tolan Gardener** € €

Under direction of lead gardener or horticulturist

weed and beautify the flower garden or veggie garden

Commitment: 1 “weeding party” a week at Ellwanger Garden,

come when you can during the garden season.

**Special Events**

**Feb: Walk the Walk** € €

Usher for school performances

Commitment: 1 of two mornings

**Apr: Preservation Conference** € €

Assist with registration, monitor sessions,

or with lunch setups

Commitment: 4 hours to one day

Have Done Would Like to Do, Tell me More

**Jun: House & Garden Tour** € €

House Captains and Hosts staff houses

on the tour. Ticket sellers and runners,

Commitment: 1 full day/ half a day.

**Sept/Oct: Inside Downtown Tour** € €

Site Managers/hosts staff loft apartments

Ticket seller and tour runners.

Commitment: 1 full day or half a day

**Oct: Ghost Walk** € € Lantern Guides lead tours to performance sites

Ticket sellers, guide coordinators, refreshments

Commitment: one evening (4 hours)

**Other Events, as Developed** € €

Do you have a professional skill/service you would consider donating?

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What special needs do you have that we should know about?

\_\_\_ Can only work a sitting down job \_\_\_\_\_\_visual impairment \_\_\_\_\_\_physical impairment

\_\_\_ Other, or details on the above:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Is there anything else you would like us to know?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Would you like to be added to our volunteer email list? You’ll receive the latest news on volunteer opportunities, sent out about 4 times a year. Please follow these steps.**

**If you don’t currently receive the Landmark Alerts enewsletter (or if you’re not sure if you do)**

1. Go to [www.landmarksociety.org](http://www.landmarksociety.org) and Subscribe to Landmark Alerts at the bottom of the page.
2. This will generate an email to you. Once you’ve received the confirmation email and clicked on it, please email [cboyer@landmarksociety.org](mailto:cboyer@landmarksociety.org) and let us know, and we will add you to the volunteer list.

**If do receive the Landmark Alerts**, just send an email to [cboyer@landmarksociety.org](mailto:cboyer@landmarksociety.org) and ask to be put on the volunteer list.

Waiver

I acknowledge there are certain inherent risks serving as a volunteer. I acknowledge that all risks cannot be prevented and I assume those beyond the control of The Landmark Society. I represent that I am physically able, with or without accommodation, to participate in volunteer service, and that I am able to use equipment and/or supplies described.

Should I require emergency medical treatment as a result of accident or illness arising during volunteer work, I consent to such treatment. I acknowledge that The Landmark Society does not provide health and accident insurance for volunteers and I agree to be financially responsible for any medical bills incurred as a result of emergency medical treatment. I will notify Landmark Society staff at my volunteer site, in writing, if I have medical conditions about which emergency medical personnel should be informed.

**I HAVE READ AND FULLY UNDERSTAND THE ABOVE WAIVER AND FULLY UNDERSTAND THE POTENTIAL HAZARDS OF VOLUNTEER WORK AND CONSENT TO ITS TERMS BY SIGNING THIS WAIVER VOLUNTARILY.**

**VOLUNTEER SIGNATURE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_DATE: \_\_\_\_\_\_\_\_\_**

**PARENT OR GUARDIAN MUST SIGN IF VOLUNTEEER IS UNDER 18**

**Please print your name here:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Please Return to Cindy Boyer

The Landmark Society

5 Castle Park

Rochester NY 14620

or scan and email to [cboyer@landmarksociety.org](mailto:cboyer@landmarksociety.org)

Thanks so Much! ☺