



**FOLSOM
HISTORY**

Volunteer Opportunities at Folsom History

Receptionist / Visitor Services

Welcome guests to the museum and provide guidance for individuals and groups. Assist in museum store sales and answer phones. Knowledge of local history a plus but not necessary (training will be provided). *Volunteers must have good customer service and verbal skills and be able to handle money exchanges.* Folsom History Museum is open Thursday through Monday 11:00am to 4:00pm. Pioneer Village is open Friday through Sunday 10:00am to 3:00pm weather permitting.

Folsom History Museum / Pioneer Village Docent

Provide guided tour groups at the museum and/or Pioneer Village on a prearranged basis. Become knowledgeable about Folsom history. Training will be provided. *Must enjoy interacting with guests, both adults and children, and have good verbal skills. Pioneer or "Old West" costumes are work for History Museum and Pioneer Village.* Time varies.

Education Outreach Program Docent

Visit schools, clubs, and organizations to share Folsom's history. May involve staffing a booth at community events. Teaching experience is a plus. *Docents must enjoy working with children.* Hours are dependent on bookings, 2-4 hours per shift.

Pioneer Village Volunteers

Pioneer Village is a living history project with historical buildings, a working blacksmith shop, gold panning, and unique volunteer opportunities. Volunteers help interpret history, provide demonstrations, and assist on restoration projects. *Volunteers must be in good health and physical condition as Pioneer Village is an outdoor venue with uneven ground.* 4-5 hours per shift.

Special Events Volunteer

Support special events by helping with set-up and clean-up, ticket, and merchandise sales. *Many events are outside, so volunteers will be subject to weather conditions.* Hours are 2-6 hours per event.

Reception Hostess

Oversee exhibit and special receptions. Duties include coordination invitations, food and beverages, supplies, and volunteers, and set-up and break-down of the event. *If you enjoy organizing parties, this is the job for you.* Hours are 4-6 hours preparatory work, 3-4 hours day of reception.

823 Sutter Street
Folsom, CA 95630
916.985.2707

www.folsomhistory.org





**FOLSOM
HISTORY**

VOLUNTEER APPLICATION FORM Folsom History

Instructions: Please provide the following information as completely as possible, typed or neatly handwritten. If applicant is under 18, please have a parent sign a permission form.

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Home phone: _____ Other (cell or work): _____

Email address _____

How did you hear about us? _____

Referred by? _____

About You

Interests, Hobbies, Skills: _____

Educational Background: _____

Previous Volunteer Experience: _____

Service Clubs, Memberships, Associations: _____

Do you have limitations that need special accommodation? _____

Do you speak any languages besides English? _____

823 Sutter Street
Folsom, CA 95630
916.985.2707

www.folsomhistory.org





FOLSOM HISTORY

Are you a member of Folsom History? _____ Willing to become a member? _____

Additional comments

Please include any other information about yourself or interests _____

Volunteer positions

In which area(s) would you be most interested in volunteering? Please check all that apply.

DOCENT

_____ Educational Outreach

_____ Visitor services

_____ Exhibits
_____ Planning
_____ Design
_____ Reception

RESEARCH

_____ Pioneer Village

_____ Volunteer Coordinator

_____ Maintenance
_____ Grounds
_____ Building
_____ Housekeeping

COLLECTIONS/ARCHIVES

_____ Curatorial

_____ Chinese Heritage Museum

_____ Special Events
_____ Host/Hostess
_____ Fundraising

Special interests

_____ Board Committees _____ Museum Committee _____ Membership Committee

_____ Craft Guild

Availability

_____ Monday _____ Tuesday _____ Wednesday _____ Thursday _____ Friday _____ Saturday

_____ Sunday

_____ Morning (8:30am to 12:00pm)

_____ Afternoon (12:00pm to 4:30pm)

Application Signature _____ Date _____

823 Sutter Street
Folsom, CA 95630
916.985.2707

www.folsomhistory.org





**FOLSOM
HISTORY**

Volunteer Emergency Information

In case of a medical emergency, if I am not able to authorize treatment for myself and/or my child, I hereby expressly give my permission to the Activity Supervisor(s) to contact 911 to obtain whatever reasonable medical care is necessary.

Name of Medical Provider _____

Telephone Number _____

Policy Holder Name _____

Policy ID Number _____

Emergency Contact

Please provide information for a family member or family whom we may contact in the event of an emergency.

Name _____

Cell or work phone _____ Home phone _____

Relationship _____

Please note any history of medical conditions (i.e. diabetes, asthma, epilepsy, heart conditions, etc); previous injuries, or serious allergies (hay fever, bee sting, food) that might limit you or your child's participation in the Activity, or the pharmaceuticals that might be used in the event of an emergency.

Name (Please print) _____ Signature _____

Date _____

823 Sutter Street
Folsom, CA 95630
916.985.2707

www.folsomhistory.org





**FOLSOM
HISTORY**

Volunteer Liability Waiver Folsom History

I agree to indemnify and hold harmless Folsom History, their employees, officers, volunteers, and other agencies from any and all liability for injuries or damages which may arise as a result of my or my child's participation in Folsom History activities and events.

I further agree that Folsom History may act in an emergency in a manner as best fits the situation, in the event that I or my child is injured or ill and an emergency contact cannot be reached. I am aware that Folsom History does not carry medical or workers' compensation insurance for volunteers.

Volunteer Name (print): _____ Parent Name (print): _____

Volunteer/Parent signature: _____ Date: _____

Volunteer Photograph Permission

I give my full permission to Folsom History to use my or my child's name, photograph, or voice recording for publicity and promotional purposes without obligation or liability to me.

Volunteer name (print): _____ Parent Name (print): _____

Volunteer/Parent signature: _____ Date: _____

823 Sutter Street
Folsom, CA 95630
916.985.2707

www.folsomhistory.org



FOLSOM
HISTORY

WAIVER, RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT (PLEASE READ BEFORE SIGNING)

ACCEPTANCE AND SIGNING THIS FORM IS A CONDITION OF BLACKSMITHING AT PIONEER VILLAGE AND LIMITS YOUR LEGAL RIGHTS VOLUNTEER (AND PARENT OR GUARDIAN, IF APPLICABLE) MUST READ AND SIGN THIS FORM.

My name is _____,

I hereby agree to accept a position in a VOLUNTARY capacity as a VOLUNTEER for **Folsom History**, who has entered into a Memorandum of Understanding regarding **Folsom History**, with the City of Folsom. I understand that the term VOLUNTEER means a Person who works without payment or other compensation for their time and service. I acknowledge that I am an at-will Volunteer with Folsom History Museums, without vested property rights in my positions as a Volunteer. I may be terminated/released at any time, without cause, and without right or appeal. I also understand that no offer of salary or full or part-time employment has been made to me. I have read the entire contents of this Volunteer Waiver, Release of Liability and Assumption of Risk Agreement and understand and agree that no liability whatsoever will be incurred by the City of Folsom or **Folsom History** for anyone who performs Voluntary actions or services.

I understand that there may be risks associated with volunteering at Pioneer Village, including, but not limited to those caused by facilities, temperature, weather condition, equipment, actions of other people including, but not limited to, participants, volunteers, trainers and spectators.

In consideration of being allowed to volunteer in any capacity for work at **Folsom History**, I hereby assume all of the risks of this participation. I realize that liability may arise from negligence or carelessness on the part of the persons or entities being released, from dangerous or defective equipment or property owned, maintained or controlled by them or because of their possible liability, without fault. I certify that I am physically fit and have not been otherwise advised against participating in any activities such as those contemplated by this release by a qualified medical professional. I hereby take action for myself, executors, administrators, heirs, next of kin, successors, and assigns as follows:

(A) Waive, Release and Discharge the City of Folsom and its officers, agents, employees and volunteers from any and all liability for my injury, death, disability, property loss, lost income or any other losses, costs, workers' compensation coverage, or actions of any kind which hereafter may accrue to me by virtue of participation;

(B) Protect, Defend, Save, Indemnify, and Hold Harmless the City of Folsom from any and all liabilities or claims made by me, or on behalf of my minor child, or other individuals or entities as a result of any of my participation

I hereby consent to receive medical treatment for myself which may be deemed advisable in the event of injury, accident and/or illness during activities. This Accident Waiver and Release of Liability shall be construed broadly to provide a release and waiver to the maximum extent permissible under applicable law.

823 Sutter Street
Folsom, CA 95630
916.985.2707

www.folsomhistory.org



**FOLSOM
HISTORY**

I UNDERSTAND THAT BY AGREEING TO THIS WAIVER I AM RELEASING THE CITY OF FOLSOM AND ITS OFFICERS, AGENTS, EMPLOYEES, AND VOLUNTEERS FROM ANY LIABILITY RESULTING FROM MY PARTICIPATION. I RECOGNIZE THAT THESE ACTIVITIES CAN BE DANGEROUS TO ME AND ACCEPT THOSE DANGERS. I UNDERSTAND THAT IF I AM INJURED, THIS RELEASE AND WAIVER WILL BE USED AGAINST ME, AND ANYONE ELSE CLAIMING INJURY OR DAMAGE BECAUSE OF MY INJURY IN ANY LEGAL ACTION. I ALSO UNDERSTAND THAT NO OFFICER, AGENT, EMPLOYEE, OR REPRESENTATIVE OF THE CITY OF FOLSOM IS AUTHORIZED TO MODIFY THIS DOCUMENT.

THE UNDERSIGNED HAS READ THE ABOVE WAIVER, RELEASE, AND ASSUMPTION AND UNDERSTANDS THAT HE OR SHE HAS GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT. SIGNED IT VOLUNTARILY AND AGREES TO BE BOUND BY IT.

Signature _____ Date _____

I understand that photographs may be taken during the course of the event or related activities, and I voluntarily consent that pictures, videos, or film likenesses of me may be taken and used for any legitimate purposes by the City of Folsom, **Folsom History**, or other sponsors at the **Folsom History**.

Signature _____ Date _____

