



# VOLUNTEER DATA FORM

Please attach one (1) 2x2 ID photo to this form



THE BAGUIO FLOWER FESTIVAL FOUNDATION, INC.

Last Name	First Name	Middle Name
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Home Address

City / Municipality / Province / ZIP Code

Contact No(s)

Date and Place of Birth

Employer

May you be called at work?  YES  NO

Office Address and Telephone No(s)

Formal Education (highest level of education completed): \_\_\_\_\_

Do you speak foreign language?  YES  NO. If yes which language? \_\_\_\_\_

Do you drive?  YES  NO.

Do you have a regular access to a vehicle?  YES  NO

List current and previous volunteer works (including brief description of duties and activities, dates of service. (Please use another page for additional info.) \_\_\_\_\_

What are your reason/s for wanting to participate as a volunteer? \_\_\_\_\_

Do you own a two way radio?  YES  NO. Is it portable radio or mobile? \_\_\_\_\_

Do you have a radio/operator license?  YES  NO. What classification? \_\_\_\_\_

What is your radio/s serial number? \_\_\_\_\_

Have you ever been convicted of a crime other than a traffic violation?  YES  NO

Do you consent to a routine check of your criminal records?  YES  NO

Please list three references of people who know you well, other than relatives, preferably for whom you have worked in either a paid or volunteer capacity. If you are currently working, either paid or as a volunteer, please include the name of your supervisor.

Name	Address	Zip Code	Contact No.
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____

The Organizing Committee reserves the right to perform verification deemed appropriate as to the suitability of anyone responsible for volunteer work. All information obtained will be held in the strictest confidence.

### CONSENT

I have read this form, understood its contents and consent to the processing of my personal data. I understand that my consent does not preclude the existence of other criteria for lawful processing of personal data, and does not waive any of my rights under the Data Privacy Act of 2012 and other applicable laws

\_\_\_\_\_  
Applicant Signature over printed name

Date of Application: \_\_\_\_\_

**\*\*DEFINITION OF VOLUNTEER SERVICE\*\***

*Volunteer service is any type of work that is done free of charge. Volunteer service can be informal, like helping the blinds cross the street. Volunteer service can also be formal such as volunteering for nonprofits, churches, schools, homeless shelters, youth groups, and senior centers.*

**VOLUNTEER RELEASE AND WAIVER OF LIABILITY FORM**

This Release and Waiver of Liability (the "release") executed on \_\_\_\_\_ (date) by \_\_\_\_\_ ("Volunteer") releases Baguio Flower Festival Foundation Inc, ("BFFFI"), a nonprofit corporation organized and existing under the laws of the Republic of the Philippines and each of its trustees, officers, employees, and agents.

The Volunteer desires to provide volunteer services for BFFFI and engage in activities related to serving as a volunteer. Volunteer understands that the scope of Volunteer's relationship with BFFFI is limited to a volunteer position and that no compensation is expected in return for services provided by Volunteer; that BFFFI will not provide any benefits traditionally associated with employment to Volunteer; and that Volunteer is responsible for his/her own insurance coverage in the event of personal injury or illness as a result of Volunteer's services to BFFFI

**Waiver and Release:** I, the Volunteer, release and forever discharge and hold harmless BFFFI and its successors and assigns from any and all liability, claims, and demands of whatever kind of nature, either in law or in equity, which arise or may hereafter arise from the services I provide to BFFFI. I understand and acknowledge that this Release discharges BFFFI from any liability or claim that I may have against BFFFI with respect to bodily injury, personal injury, illness, death, or property damage that may result from the services I provide to BFFFI or occurring while I am providing volunteer services.

**Insurance:** Further I understand that BFFFI does not assume any responsibility for or obligation to provide me with financial or other assistance, including but not limited to medical, health, or disability benefits or insurance. I expressly waive any such claim for compensation or liability on the part of BFFFI beyond what may be offered freely by BFFFI in the event of injury or medical expenses incurred by me.

**Medical Treatment:** I hereby Release and forever discharge BFFFI from any claim whatsoever which arises or may hereafter arise on account of any first-aid treatment or other medical services rendered in connection with an emergency during my tenure as a volunteer with BFFFI

**Assumption of Risk:** I understand that the services I provide to BFFFI may include activities that may be hazardous to me including, but not limited to \_\_\_\_\_ involving inherently dangerous activities.

As a volunteer, I hereby expressly assume risk of injury or harm from these activities and Release BFFFI from all liability.

**Photographic Release:** I grant and convey to BFFFI all right, title, and interests in any and all photographs, images, video, or audio recordings of me or my likeness or voice made by BFFFI in connection with my providing volunteer services to BFFFI

Other: As a volunteer, I expressly agree that this Release is intended to be as broad and inclusive as permitted by the laws of the Republic of the Philippines and that this Release shall be governed by and interpreted in accordance with the laws of the Republic of the Philippines.

I agree 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.

\_\_\_\_\_  
Signature (Or parent/guardian if under 18)      Date