

KETTERING SAFETY VILLAGE 2021 APPLICATION FOR STUDENT VOLUNTEERS

Kettering Safety Village, sponsored by the DorWood Optimist Club, teaches children entering Kindergarten safety-related life skills. Student volunteers are responsible for many aspects of the program: assisting with safety lessons, supervising children during a bus ride and various safety skill activities, helping with class activities and clean up. Most of all, you must enjoy working with children and helping them grow and learn.

For Safety Village, **THE COMMITMENT IS A ONE-WEEK CLASS**. Volunteers must be entering 6th grade or higher in August 2021. Please understand that the number of available positions is limited, i.e., not every applicant may receive a position. You will receive verification of volunteer-community service hours.

APPLICATION DEADLINE - Monday, APRIL 26, 2021

	APPLICAN	IT INFORMATION	
Name			Date
Grade Entering in 8/2021	School Attendir	ng in 8/2021	Current Age
Address			
City			Zip Code
City			Zip Code
Home Phone		Cell Phone	
Email (Not a kcsstudent email address)			
Have you ever volunteered for Safety Village before?		If yes, how many years?	
Please list community, school & service clubs/organizations to which you belong:			
Please list any job or work commitments,	special health cor	ncerns or other considerate	ions that we should be made aware of:
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PARENT/GUARDIAN INFORMATION			
Name of Parent/Guardian	Home Phone	Cell Phone	
Name of Parent/Guardian	Home Phone	Cell Phone	

EMERGENCY CONTACTS			
(in case parents/guardians cannot be reached)			
Name	Home Phone	Cell Phone	
Name	Home Phone	Cell Phone	

Student Volunteer Training Days
Friday, June 11, 10:00 – 10:30am at Southdale Elementary
Thursday, June 17, 12:30 – 1:00pm at Southdale Elementary

If you have not volunteered with Safety Village before, please attend one training session before your scheduled dates. For any conflicts or work issues in attending training, please note and contact Kristin Schreel at Kristin.Schreel@ketteringoh.org or (937) 296-2436.

PLEASE NOTE:

- You must be able to attend the full week(s) of the session(s) selected.
- Preference will be given to those who are able to work both A & B sessions of a week.
- Snacks are provided during the break to volunteers working both A & B sessions.

How many weeks would you like to be assigned?

Please **CHECK** the sessions that you are available to volunteer for Safety Village.

	KETTERING SAFETY VILLAGE 2021				
✓	SESSION	TIME	DATE	LOCATION	
	831000 A	8:00-10:00	June 14-18	All sessions will take place at:	
	831000 B	10:30-12:30	June 14-18		
	831001 A	8:00-10:00	June 21-25	Southdale Elementary School	
	831001 B	10:30-12:30	June 21-24	1200 W. Dorothy Lane	
	831002 A	8:00-10:00	June 28-July 2	Kettering, OH 45409	
	831002 B	10:30-12:30	June 28-July 2		

Return this form by **April 26, 2021** to: City of Kettering Traffic Engineering Dept. 3600 Shroyer Road Kettering, OH 45429 ph: (937) 296-2436

Or Email copy to Kristin.Schreel@ketteringoh.org

You will be contacted by the week of May 10 if you have been selected as a volunteer for Safety Village.

WAIVER FOR PARTICIPANT AND/BY PARENT

I, for myself and my child(ren), agree to assume all risks, including, but not limited to, risk of physical injuries, death, loss of services or consortium, loss or damage to property, or any other loss or damage I or my child(ren) may sustain as a result of participating in any and all activities connected with or associated with this program. In consideration of the City of Kettering allowing my child to participate in this program, and with the intent to be legally bound, I hereby, for myself, for my child, all hers, executors, administrators, and assigns, do hereby forever: release, waive, and relinquish all claims I or my child have or may have as a result of participating in this program; promise not to sue the City of Kettering and its officers, employees and agents from any and all liabilities, claims, demands, actions or causes of action resulting from, whether directly or indirectly, my or my child's participation in this program; and grant and give the City of Kettering the right to use my or my child's photograph or image, with or without my or my child's name, both individually and in conjunction with other persons or objects for any and all purposes including, but not limited to, private or public presentations, advertising, publicity and promotion. By signing below, I certify that I have read and agree to be bound by these conditions and that all information contained herein is true and that I am giving up legal rights.

all information contained herein is true and that I am giving up legal rights.			
Signature of Parent/Guardian	Date		

EMERGENCY MEDICAL AUTHORIZATION

PART I OR II MUST BE COMPLETED

PART I – TO GRANT	CONSENT
I hereby give consent for the following medical care	
Doctor	Phone
Dentist	Phone
Medical Specialist	Phone
Local Hospital	Phone
for (1) the administration of any treatment deemed not event the designated preferred practitioner is not a dentist; and (2) the transfer of the child to any hospital. This authorization does not cover major surgery unless physicians concurring in the necessity for such surges such surgery. Facts concerning the child's medical history including any physical impairments to which a physician should be a surgery and the child's medical history including any physical impairments to which a physician should be a surgery and the child's medical history including any physical impairments to which a physician should be a surgery and the child's medical history including any physical impairments to which a physician should be a surgery and the child's medical history including any physical impairments.	available, by another licensed physician or al reasonably accessible. ss the medical opinions of two other licensed ery are obtained prior to the performance of a allergies, medications being taken, and
Signature of Parent/Guardian	Date
(DO NOT COMPLETE PART II IF N PART II – REFUSAL T I do <u>not</u> give my consent for emergency medical tre or injury requiring emergency treatment, <u>I</u> wish the a	O CONSENT eatment of my child. In the event of illness
Address	

VOLUNTEER INFORMATION

You will be contacted the week of May 10, 2021, if you have been selected as a volunteer for Safety Village. Notification will take place by email, so be sure to check your inbox. There may be openings available after May 10. If you find you are available, please contact Kristin Schreel at (937) 296-2436 or Kristin.Schreel@ketteringoh.org.

Student Volunteer Training Days 2021 Friday, June 11 10:00 – 10:30am at Southdale Elementary Thursday, June 17 at 12:30 – 1:00pm at Southdale Elementary

- If you have not volunteered with Safety Village before, please attend one training session before your scheduled dates. It will take approx. 30 minutes.
- It is important to remember that these children will look up to you as a "big person," someone whom they will trust and count on. They watch the things you do and say; therefore, volunteers must model appropriate behavior, wear appropriate clothes and use appropriate language.
- Volunteers will be given a detailed explanation of their responsibilities on the <u>training day</u>.
 Each volunteer will be assigned to a group of 4 6 children.
- No electronic device use allowed during class times.
- Face masks are required for all students, volunteers, staff & instructors.
- If you have any questions about the application process or the program, please contact Kristin Schreel at Kristin.Schreel@ketteringoh.org or (937) 296-2436.







