

MILWAUKEE BALLET

VOLUNTEER APPLICATION FORM

The information provided will be used to run a criminal background check.

Last name _____ First name _____

Other names _____

Street Address _____

City _____ State _____ ZIP _____ Telephone _____

Email _____ Date of Birth _____ Gender _____

Emergency Contact Name & Phone Number _____

Are you the parent/guardian of an enrolled student at Milwaukee Ballet School & Academy? Yes No

Are you presently employed? Yes No May we contact your present employer? Yes No

If yes, please provide employer contact information _____

How long have you resided in Wisconsin? _____ years. If less than 5 years, please list previous States of residency for past 10 years _____

Have you ever been convicted for any crime, including sex-related or child-abuse related offenses? Yes No

If yes, please explain, attach additional sheets, as needed. _____

AREA(S) OF INTEREST FOR VOLUNTEERING (e.g. Backstage, Boutique, Gala, Marketing, etc)

CERTIFICATE OF APPLICANT

I authorize Milwaukee Ballet to make any inquiry of or receive information from any person or organizations regarding my suitability as a volunteer and do hereby give permission to these persons or organizations to provide such information. Such inquiries may include and not be limited by enumeration to the quality and quantity of my work, work history and record, character, qualifications, and records of convictions. For and in consideration of the release of such information, I hereby forever waive, release, and covenant not to sue any person or organization including Milwaukee Ballet, its agents and employees for the result of providing, obtaining, or acting upon such information. I give this waiver, release, and covenant not to sue for myself, my heirs, assigns, and successors in interests forever. I give this waiver, release, and covenant not to sue understanding that the information obtained may be such as to disqualify me from participation as a volunteer. I understand that such information is sought with confidentiality, and I will not request copies of such information. I also certify that all statements made on this application are true and complete, accurate and not misleading to the best of my knowledge. I understand that any false statements, incomplete statements, or misrepresentations may subject me to disqualification or dismissal. A copy of this authorization shall be effective as the original.

I give permission to Milwaukee Ballet to create pictures, slides, digital images, videos or other reproductions of me or of materials owned by me, and to put the finished images to use without compensation in broadcast productions, publications, on the Web, or other printed or electronic materials related to the role and function of Milwaukee Ballet.

Signature _____ Date _____