



MAIN STREET MINISTRIES

Vidor, Texas

THRIFT STORE VOLUNTEER INFORMATION

Main Street Thrift Store

Richard Brush, Manager

335 N Main Street

Vidor, Texas

(409) 783-9777

NAME: _____ DOB: _____

ADDRESS: _____

HOME PHONE: _____ CELL: _____

EMAIL: _____

EMERGENCY CONTACT:

NAME: _____

PHONE: _____

ANY PERTINENT MEDICAL INFORMATION:

AVAILABILITY/DAY(S): _____

EXPLAIN YOUR LEVEL OF AVAILABILITY: _____

Circle One: HOURS 9:00 – 1:00

HOURS 1:00 – 5:00

Circle: POSITION(S) THAT YOU WOULD LIKE TO FILL:

SORTER

FLOOR

BOUTIQUE

CASHIER

WAREHOUSE

WHAT DO YOU BELIEVE YOUR STRENGTH/WEAKNESS TO BE? _____

I UNDERSTAND THAT AS A VOLUNTEER I WILL BE SUBJECT TO A BACKGROUND CHECK.

SIGNATURE: _____ DATE: _____



VOLUNTEER WAIVER

PO Box 989
Vidor, Texas 77670
(409) 498-4082

By my signature on this document, I assume all liability from any cause whatsoever that may arise out of or in connection with my volunteering to help with preparation for or helping on the day of The Main Street Thrift Store [hereinafter called "this nonprofit organization"], including but not limited to all liability from any cause whatsoever for personal injury or property damage; all liability from any cause whatsoever for contribution or indemnification; and all liability from any cause whatsoever that may arise out of, in connection with, or during the time of my volunteering to provide services for this nonprofit organization.

I release and hold harmless this nonprofit organization, its directors, officers, employees, agents, volunteers, assigns, and successors [hereinafter, "the protected parties"] from all liability from any cause whatsoever as described above.

By this document, I assume all liability as described above that existed at the time of the execution of this document and all liability from that time forward into the future until such time as this nonprofit organization shall execute in writing a document revoking this document.

By this document, I release and hold harmless the protected parties from all liability from any cause whatsoever as described above that existed at the time of the execution of this document and all liability from that time forward into the future until such time as this nonprofit organization shall execute in writing a document revoking this document.

This document shall be given a liberal construction, with all ambiguities resolved in favor of the protected parties. If any provision of this document is deemed to be partially void, invalid, or unenforceable, that provision shall continue in full force and effect to the maximum extent permitted by law and all remaining provisions of this document shall continue in full force and effect. To the extent that any provision of this document is deemed to be completely void, invalid, or unenforceable, that provision shall be severed from the remainder of this document and all remaining provisions of this document shall continue in full force and effect.

Date

Signature

Print name



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Request for Criminal Records Check

I hereby request www.publicdata.com to release my information which pertains to any record of convictions contained in its files or any criminal file maintained on me whether local, state, or national. I hereby release the stated agency from any and all liability resulting from such disclosure.

Date _____

Name (Printed) _____

Maiden Name (if applicable) _____

Print any and all aliases _____

Date of Birth _____ Place of Birth _____

SS# _____ TX DL# _____

Confidentiality:

Recipient shall limit disclosure of Confidential Information within its own organization to its directors, officers, partners, members and/or employees having a need to know and shall not disclose Confidential Information to any third party (whether an individual, corporation, or other entity) without the prior written consent of Disclosure.



Community Service Worker Contract

I, _____ understand that while Main Street Thrift Store is allowing me to work my court appointed community service hours, I will come prepared to work to include bringing court documents and follow all policies of the store.

I understand that this is a business, however, it is also a Christian Ministry, and I may be in contact with customers, and I will be required to conduct myself in an appropriate manner while working.

I will wear appropriate clothing. Clothing referencing drugs, drinking, offensive language, or sexual content, etc. will NOT be allowed. I understand if clothing is not appropriate, I will be asked to change or leave and will NOT receive credited hours for time missed.

I understand that I am to work and to do what is asked of me to get credited hours and I understand I will be asked to leave and will NOT receive credit if not working, sleeping while on duty, horse playing, drugs, drinking, smoking or vaping, etc. of any kind.

I understand that if any of this occurs Main Street Thrift Store has the right to permanently terminate my time at the store and I will be given credit for only the time actually worked.

I, _____ understand that Main Street Thrift Store has the right to contact the court if for any reason they have to terminate my community service time.

Community Service Worker

Date

Manager on Duty

Date