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**VALENTINE’S DAY MAKEOVER—VOLUNTEER APPLICATION 2013-2014**

All Volunteer Position Requirements:

Have compassion for the women Reveal serves // Committed to the safety of the women Reveal serves

Participation in required team meetings and calls // Access to e-mail and Internet

**Available on the day of event: February 15, 2014**

**Volunteer Positions:**

Logistics//Hosts//Fashion//Beauty//Goodie Bags//Security//Food

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| **LOGISTICS:** Morning set-up team, afternoon tear-down/U-haul team, runners during event. |
| **HOSTS:** Greet and escort the women to different stations; multilingual preferred: Spanish, Korean, or Mandarin. (All Day) |
| **FASHION:** (Professional industry experience preferred) Set-up, organize, and maintain the fashion area, style outfits for the women. (All Day) |
| **BEAUTY:** (Professional industry experience preferred) Hair stylists, make-up artists, skincare, and nails (All Day) |
| **GOODIE BAGS:** Assemble goodie bags with products donated by sponsors; write thank-you cards. (Morning) |
| **SECURITY:** Maintain a safe environment for the women (entrance, fashion area, and elevators) (All Day) |
| **FOOD:** Set-up and maintain the hospitality area. (All Day) |

**APPLICATION**

**Instructions: Please complete the following and submit with Signed Volunteer Confidentiality Agreement and Signed Photography/Videography Release Form to** [**eventcoordinator@revealnyc.org**](mailto:eventcoordinator@revealnyc.org)**.**

***Applicant must be over 18 years of age to participate.***

**APPLICATION INFORMATION**

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| **Name:** |
| **Mailing Address:** |
| **Home Telephone: Mobile Telephone:** |
| **E-mail Address:** |
| **Are you currently employed? Yes No** |
| **If yes, what is your current work position/employer?** |
| **Do you speak any other languages aside from English? If yes, please describe:** |
| **Have you been convicted of a felony? If yes, please describe:** |
| **Have you volunteered for Reveal before? When and what role?** |
| **What is your preferred volunteer position? 1st choice: 2nd choice:**  **3rd choice: or No Preference—Assign me where needed most** |

***Electronic Signature Agreement.*** *The [Electronic Signatures in Global and National Commerce Act](http://frwebgate.access.gpo.gov/cgi-bin/getdoc.cgi?dbname=106_cong_bills&docid=f:s761enr.txt.pdf" \t "_blank) - also known as E-Sign - signed into law on June 30, 2000 recognizes electronic signatures as having the same legal weight as handwritten signatures for most documentation, including the below. You agree your electronic signature is the legal equivalent of your manual signature on these agreements. By signing you consent to be legally bound by the agreements’ terms and conditions.*

**Confidentiality Agreement**

I understand that confidentiality is critical to all residents, staff, volunteers and directors of the safe houses Reveal serves. This includes but is not limited to the safe house Restore NYC, Safe Horizon, etc. I understand that the women and children who attend the Reveal workshops and Makeover Event (in February) have come from places of abuse and look to the respective safe house and Reveal as a place of refuge. Therefore, I agree not to discuss with anyone (nor identify) the residents, their children, their situations, nor the physical location of the safe house and Makeover Event space. I further understand that failure to abide by this confidentiality agreement will be cause for the immediate termination of my relationship with Reveal.

It is my understanding that any breach of confidential information will result in criminal prosecution and legal

action taken by Reveal and the respective safe house, as allowable by New York state mandate (it is considered a

misdemeanor in the state of New York State to reveal the location of a safe house or confidential shelter for victims of

domestic violence.)

For volunteer photographers and videographers: In exchange for the opportunity to provide said services, I agree that any photograph, video footage, or other image of any safe house client, obtained by me in connection with the workshops and Event, shall not be disclosed in any manner, unless Reveal and the respective safe house grants its permission for said disclosure.

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(Signature) (Date)

**Photograph/Videography Release**

I grant to Reveal, the right to take photographs of me in connection with the Reveal Workshops and/or Makeover Event. I authorize Reveal, its assignees, and transferees to copyright, use and publish the same in print and/or electronically. I agree that Reveal may use such photographs of me with or without my name and for any lawful purpose, including for example, such purposes as publicity, illustration, advertising, and Web content.

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(Signature) (Date)