



# Volunteer Application

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## *Personal Information*

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_

Parish: \_\_\_\_\_

## *Volunteer/Background Information:*

1. How did you hear about AM 1260 The Rock?

\_\_\_\_\_  
\_\_\_\_\_

2. Why do you wish to volunteer for AM 1260 The Rock?

\_\_\_\_\_  
\_\_\_\_\_

3. Do you have previous experience with radio or Catholic organizations?

\_\_\_\_\_  
\_\_\_\_\_

4. Please list previous volunteer experience:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



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5. Please indicate any skills or experience that may aid you in volunteering for Catholic radio:

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6. Have you ever been convicted of a crime? (circle one) Yes / No  
If yes, please explain:

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7. Do you have any physical or medical conditions that may limit your ability to participate in certain activities?

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*Time Availability: (please check all times that apply)*

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Morning							
Afternoon							
Evening							
Events Only							

*Volunteer Area(s) of Interest: (please check all areas that interest you)*

- Office Support
- Parish Ambassador (Communication between station and your parish)
- Food Volunteer
- Parish Visit Volunteer (Helping when AM 1260 promotes station at parishes)
- Voicework
- Event table (Answering questions about station, selling promotional items)
- Prayer
- Spirit Drive Volunteer (On air fundraisers during Spring and Fall)
- Other \_\_\_\_\_



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All volunteers must agree with all the teachings of the Catholic Church and be obedient to the Bishop of the Catholic Diocese of Cleveland and the Pope in Rome. Training sessions will be given to positions that require it. Volunteers must be generally familiar with the broadcast programs of AM 1260 The Rock.

Volunteer hereby releases St. Peter the Rock Media, AM 1260 The Rock from all claims for personal injuries while a volunteer at AM 1260 The Rock, Cleveland's Catholic radio station or while performing volunteer activities away from its office headquarters.

Volunteer hereby grants and conveys to St. Peter the Rock Media all right, title, and interests in any and all photographs, images, video, or audio recordings of me or my likeness or voice made by St. Peter the Rock Media in connection with my providing volunteer services to St. Peter the Rock Media.

By signing below, I agree with the above and represent that all information I have supplied in this application is true to the best of my knowledge, and I express my understanding and intent to enter into this Release and Waiver of Liability willingly and voluntarily.

Volunteer Signature:

\_\_\_\_\_ Date: \_\_\_\_\_

Signature of Parent/Legal Guardian if under the age of 18:

\_\_\_\_\_ Date: \_\_\_\_\_

Please submit this form in person or by mail to

**AM 1260 The Rock**

**145 Ken Mar Industrial Parkway**

**Broadview Heights, OH, 44147**

or e-mail it to

**[info@am1260therock.com](mailto:info@am1260therock.com)**