

Office use only: Completed by: \_\_\_\_\_ Date: \_\_\_\_\_

RAM Palm Beach County **GENERAL NON-MEDICAL** VOLUNTEER APPLICATION  
PLEASE TYPE OR PRINT CLEARLY

NAME \_\_\_\_\_ BIRTH DATE \_\_\_\_\_ TODAY'S DATE \_\_\_\_\_

ADDRESS \_\_\_\_\_ HOME PHONE \_\_\_\_\_

\_\_\_\_\_ WORK PHONE \_\_\_\_\_

\_\_\_\_\_ FAX NUMBER \_\_\_\_\_

E-MAIL ADDRESS \_\_\_\_\_ REFERRED TO RAM BY \_\_\_\_\_

Date(s) Apr 9, 10, 11, 2010 Location: West Palm Beach, Florida Country USA

JOB ASSIGNMENT (if known): \_\_\_\_\_

LANGUAGE SKILLS: YES NO IF YES WHAT \_\_\_\_\_

PLACE OF EMPLOYMENT (if a health institution): \_\_\_\_\_

OTHER SPECIAL SKILLS: \_\_\_\_\_

DATES YOU ARE VOLUNTEERING (circle all that apply):  
Apr 9 (Set-up) Apr 10 (Event) Apr 11 (Event & break down)

SHIFTS YOU ARE VOLUNTEERING (circle all that apply)

Fri 04/09 9am-1pm Sat 04/10 6am-12pm Sun 04/11 6am-12pm  
Fri 04/09 1pm-6pm Sat 04/10 12pm-6pm Sun 04/11 12pm-7pm\*  
Fri-Sun 04/09 -04/11 'On-call' team for RAM weekend \*(time may vary depending when event ends)

PLEASE EDIT TO ACCOMMODATE YOUR SHIFTS ---

Time Log CLINIC #

City/State and Zip: West Palm Beach, Florida 33411

**ALL VOLUNTEERS MUST CHECK IN AND OUT DAILY AT VOLUNTEER REGISTRATION TABLE**

Compliance Statement

**Confidentiality Statement**

*I understand that while I am participating as a registered volunteer at the RAM Palm Beach County Clinic (RAM PBCC), it is mandatory that I maintain complete privacy and confidentiality of all patients. This pertains to all present and future digital, written and verbal communications referring to any RAM PBCC patient. Further I agree not to photograph or record patients while at RAM PBCC. With my signature on the line below, I acknowledge that I have read, understand, and agree to adhere to this policy of confidentiality for the RAM Palm Beach County Clinic.*

**Release and Indemnification**

*I hereby release and indemnify, Remote Area Medical ® and the United Cancer Foundation Inc., non-profit and charitable organizations, and all its respective officers, directors, agents, contractors, heirs, successors and assigns, from prosecution or presentation of any claim for bodily injury or death or for property loss or damage incurred in connection with this RAM Palm Beach County expedition or related activities.*

\_\_\_\_\_  
**Printed Name**

\_\_\_\_\_  
**Signature**

RAM Palm Beach County is a program of Remote Area Medical ®.  
Located at: 1834 Beech St. • Knoxville, TN 37920 • 1-865-579-1530

**Please return form to: United Cancer Foundation, 1200 North Federal HWY suite 200, Boca Raton FL 33432  
Or fax to: 561-637-1914. If you have any questions, email Steve@UnitedCancerFoundation.org**

**RAM IS A TOBACCO-FREE EVENT!!!! SERVICE ANIMALS ONLY**