

Bays Mountain Park Volunteer Application



Thank you for your interest in volunteering at Bays Mountain Park!
Please complete this application and return it to the address below.

A staff member will contact you once your application has been reviewed. LauraEllis@KingsportTN.gov
or mail it to Bays Mountain Park, 853 Bays Mountain Park Road, Kingsport, TN 37660.

Personal Information (please print)

If under 18, please complete section on page 4.

Today's Date: _____

Full Name: _____

Preferred Pronouns (optional): _____

Street Address: _____

City / State / ZIP: _____

Phone Numbers:

- Mobile: (____) ____ - _____
- Home: (____) ____ - _____
- Work: (____) ____ - _____

Email: _____

Shirt Size: _____ Date of Birth: _____

Up-to-date tetanus vaccinations are **strongly recommended** for all volunteers.

Any medical information shared with the Volunteer Coordinator will be kept **confidential** and used only to ensure your safety during volunteer activities.

Emergency Contact

Name: _____ Relationship: _____

Phone: (____) ____ - ____ Mobile: (____) ____ - ____ Work: (____) ____ - ____

Are you receiving academic credit for your volunteer work? No Yes

If yes, how many hours are required: _____ Deadline: _____

Are you seeking to complete court-ordered community service hours? <input type="checkbox"/> No <input type="checkbox"/> Yes
If yes, please indicate the offense or reason for which they were assigned:

Current Employment Status:

Full-Time Part-Time Student Retired Unemployed

Volunteer Experience

Organization	Your Role	From	To	Reason for Leaving

Why do you want to volunteer with Bays Mountain Park?

List any job experiences, skills, qualifications, or connections you could use as a volunteer:

Please Indicate Your Availability (example 12:30 to 3:30 pm)

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Morning							
Afternoon							
Evening							

How long of a commitment are you prepared to make?

- 1 month
 6 months
 1 year
 on-going

How often would you like to volunteer?

- 1 day/week
 1 day/month
 2 days/month
 Other: _____

Please select up to 3 volunteer opportunities you are interested in doing:

- Animal Care – Help clean, feed, and care for the park’s animal ambassadors while supporting staff in maintaining healthy, safe habitats.
- Planetarium/Astronomy - Assist with public programs, telescope operations, and educational presentations about space and the night sky.
- Raptor Center – Aid the care, feeding, and observation of the park’s birds of prey while helping to maintain enclosures and equipment.
- Farmstead Museum – Interpret early mountain park history, care for antique artifacts, and assist park staff with special rental events held on the upper level.
- Programming – Assist with planning, leading educational and recreational programs for visitors, including off-site and special events.
- Trail Maintenance – Help build, repair, and maintain park trails to ensure safe and enjoyable access for visitors.

Other/comments:

How did you hear about us?

ACKNOWLEDGEMENT

I certify that the information in this application is true and complete to the best of my knowledge. I understand I will be required to sign a release form, code of conduct, and attend orientation before volunteering at the park. Volunteers are approved based on the completion of a criminal background check (which potential volunteers will be asked to do.)

Signature of Prospective Volunteer

Date

For Office Use Only:

Application reviewed by: _____

Date: _____

Orientation Completed: _____

Date: _____

For Applicants Under 18 Years Old

Please note: Applicants under 18 may be limited in the tasks they are permitted to perform. Volunteers must be at least 14 years old to volunteer with Bays Mountain Park and must be supervised by an entrusted adult or park staff. All volunteers under 18 years of age are to have written consent from a parent or legal guardian to volunteer at Bays Mountain Park.

I, the undersigned, am the parent/legal guardian of the above-named minor. By signing below, I consent to my child's participation as a volunteer with Bays Mountain Park. I understand that some volunteer opportunities may have age restrictions and that my child will be supervised during service, either by me, an entrusted adult, or a staff member.

Parent/Guardian Name: _____

Signature: _____

Phone: _____

Email: _____

RELEASE OF ALL CLAIMS – Bays Mountain Park

I, _____ (print name), the undersigned, in consideration for the opportunity to participate in _____ **Volunteer** _____ activities at Bays Mountain Park, do hereby release the City of Kingsport, TN, and Bays Mountain Park, their officials, employees and assigns, from all claims, demands, damages, actions, and causes of action that may arise from any and all activities performed by me at Bays Mountain Park, Kingsport, TN.

I understand that participation in activities performed in natural areas is a high risk, potentially hazardous, and dangerous activity in which serious injury or death can occur. I agree to abide by all rules and directions set forth by supervisory personnel during these activities for the protection of myself and others who may be participating with me. I also know that despite abiding by these rules and obeying the directions as set forth by Bays Mountain Park, there is an inherent risk to these activities, and I assume the risk of performing these activities. I also assume any and all other risks associated with this activity, including, but not limited to, animal or non-animal related injury, slips/trips/falls, the effects of weather, and all other risks, known and unknown.

I understand that this instrument is a full and final release of all claims of every nature and kind whatsoever relating to said activity, and that this instrument releases claims that are known and unknown and suspected and unsuspected. Knowing the rules and risks of participating in activities in natural areas, and in consideration of my designation as a participant, I hereby for myself, my heirs, executors, administrators or anyone else who may claim on my behalf, release the city of Kingsport, Tennessee, Bays Mountain Park from any and all claims of liability for death, personal injury or property damage of any kind or nature whatsoever arising out of, or in the course of my activity as a participant.

This release and waiver extends to all claims of every kind or nature whatsoever, foreseen or unforeseen, known or unknown. I further state that I have carefully read the foregoing release and know its contents, and sign my name as my own free act.

Participant	
Printed:	
Signature:	Date:
Witness	
Printed:	
Signature:	Date:
For participants under 18, Parent/Guardian signature required	
Printed:	
Signature:	Date:

Revised October 21, 2025