



Ruston Farmers Market
Volunteer Sign Up

We are glad you are interested in volunteering with the Ruston Market! Volunteers are a vital part of the market and it's a fun way to participate in the local food community.

Please take a minute and share your contact information help us understand how you'd like to get involved.

Name _____

E-mail _____ Phone: _____

How would you like to volunteer at the market? Check all that apply

- | | |
|--|--|
| <input type="checkbox"/> Kids activities Saturdays 9-1 | <input type="checkbox"/> Community outreach (SNAP/Education) |
| <input type="checkbox"/> Organize for special events | <input type="checkbox"/> Photography/Videography (YouTube Channel) |
| <input type="checkbox"/> Decorating | <input type="checkbox"/> Count visitors |
| <input type="checkbox"/> Paint, building maintenance/repairs | <input type="checkbox"/> Office work (organizing metrics/data, etc.) |
| <input type="checkbox"/> Clean up after markets & events | <input type="checkbox"/> I'd like to help by being a greeter |
| <input type="checkbox"/> Help in the gardens (Learning/Pollinator) | |

Please check any of the following skills that you may have that you could use as a Ruston Farmers Market Volunteer: Check all that apply

- | | |
|--|--|
| <input type="checkbox"/> Customer Service | <input type="checkbox"/> Building Maintenance |
| <input type="checkbox"/> Landscaping | <input type="checkbox"/> Public Speaking |
| <input type="checkbox"/> Vegetable Gardening | <input type="checkbox"/> Spreadsheets/Excel |
| <input type="checkbox"/> Photography/Videography | <input type="checkbox"/> Writing |
| <input type="checkbox"/> Teaching | <input type="checkbox"/> Art (drawing, chalk, dry erase, etc.) |
| <input type="checkbox"/> Construction | <input type="checkbox"/> Event planning |

We know that each volunteer has a unique schedule and so we'd like to tailor volunteer commitments to those unique schedules. Help us define your availability:

- | | |
|--|--|
| <input type="checkbox"/> I am available on Saturdays during the market | <input type="checkbox"/> I am available during the week (M-F 9-4) |
| <input type="checkbox"/> I am available one Saturday per month | <input type="checkbox"/> I would like to be on-call for special projects |
- Other _____

Would you like to be added to the volunteer e-mail list for special projects throughout the year?

Yes No

Please share any comments or suggestions here: _____

Contact: Tom Faber info@rustonfarmersmarket.org 318-957-1305
Operations Manager
Ruston Farmers Market



Ruston Farmers Market Volunteer Hold Harmless Agreement

I, _____, am volunteering at the Ruston Farmers Market. I hereby release, indemnify, and hold harmless, The Ruston Farmers Market, North Louisiana Farm Fresh, The City of Ruston, their directors and officers, employees, successors, assigns, legal representatives, organizers, sponsors, and supervisors of its activities from any and all claims, causes of actions and liability arising from or in any way connected with my volunteer participation with the Ruston Farmers Market.

____ Please check here if you give the Ruston Farmers Market permission to use photographs of you in its publicity efforts.

____ Please check here if we CAN use your name in association with your photograph.

Signed (parent/guardian): _____ Date: _____

Printed Name: _____

Group name (if volunteering with a group): _____

For Minors 12-18

Ruston Farmers Market Minor Volunteer Hold Harmless Agreement

I, _____, understand that my minor child _____, is volunteering at the Ruston Farmers Market. I hereby release, indemnify, and hold harmless, The Ruston Farmers Market, North Louisiana Farm Fresh, The City of Ruston, their directors and officers, employees, successors, assigns, legal representatives, organizers, sponsors, and supervisors of its activities from any and all claims, causes of actions and liability arising from or in any way connected with my child's volunteer participation with the Ruston Farmers Market.

____ Please check here if you give the Ruston Farmers Market permission to use photographs of your child in its publicity efforts.

____ Please check here if we CAN use your child's name in association with your photograph.

Signed: _____ Date: _____

Printed Name: _____

Group name (if volunteering with a group): _____