



## **Youth Tour Ambassador**

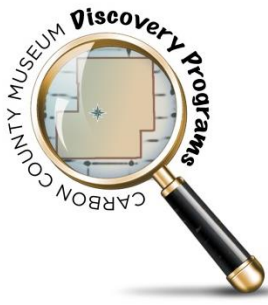
### *Program Description*

CCM's Youth Tour Ambassador program gives students (4<sup>th</sup> – 12<sup>th</sup> grade) agency in leading museum visitors through exhibit spaces. Trained in content history and tour presentation techniques, participants involve critical thinking skills while facilitating discussions. The program encourages them to engage in both museum spaces and their larger community while building personal confidence in their own observations and abilities.

Youth Ambassadors research and learn specific exhibits or objects to share with museum audiences. Running from June to August, students commit to one two-hour shift per week (or a total of 20 hours in a 3-month span) to assist museum staff in visitor services activities.

Participant Responsibilities include:

- Learning exhibit materials for museum programs and guided tours
- Guiding museum visitors through specific gallery spaces/exhibits
- Assisting museum staff in preparing for group visits and educational programs



**Youth Tour Ambassador**  
*Student Agreement*

**Name:** \_\_\_\_\_ **Grade:** \_\_\_\_\_

**Birthday:** \_\_\_/\_\_\_/\_\_\_ **School:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Student Home Address:** \_\_\_\_\_

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**Name of Parent/Guardian 1:** \_\_\_\_\_

**Phone Number 1:** \_\_\_\_\_ **Phone Number 2:** \_\_\_\_\_

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

**Name of Parent/Guardian 2:** \_\_\_\_\_

**Phone Number 1:** \_\_\_\_\_ **Phone Number 2:** \_\_\_\_\_

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

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Does the student participant have any allergies or physical restrictions/limitations that require special accommodations? Circle one: **Yes** / **No**

If yes, explain: \_\_\_\_\_

**Student Interests/Skills/Hobbies:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Carbon County Museum's Youth Tour Ambassador program gives students (4th – 12th grade) agency in leading museum visitors through exhibit spaces. Trained in content history and tour presentation techniques, participants involve critical thinking skills while facilitating discussions. The program encourages them to engage in both museum spaces and their larger community while building personal confidence in their own observations and abilities.

Youth participants research and learn specific exhibits or objects to share with museum audiences. Students commit to one (1) two-hour (2) shift per week (or a total of twenty (20) hours in a three (3) month span) to assist museum staff in visitor services activities.

Participant Responsibilities include:

- Learning exhibit materials for museum programs and guided tours
- Guiding museum visitors through specific gallery spaces/exhibits
- Assisting museum staff in preparing for group visits and educational programs

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### **Student Consent**

*Please check to indicate understanding*

- I understand that I am expected to commit to one (1) two-hour (2) shift per week (or a total of twenty (20) hours in a three (3) month span) to assist museum staff in visitor services activities.
- I understand that I am responsible for learning select exhibit materials and sharing this information with museum visitors
- I understand that the museum is a professional work space and I must dress appropriately. Dresses, skirts, jeans, and t-shirts are fine, but please no shorts. You will also be given a name tag. Please make sure you wear it whenever you are volunteering.
- I understand that my participation in this program is a privilege and as a volunteer of Carbon County Museum, I agree to participate to the best of my abilities and to follow the rules and guidelines of the museum.

**Student Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

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### **Parental Consent**

*Please check to indicate understanding*

- I give my permission for my child to join be a Youth Tour Ambassador at Carbon County Museum. This opportunity, as part of the museum team, cannot be taken lightly, and I will therefore, support my child's efforts to comply with the terms of this commitment.
- I understand that my child is expected to commit to one (1) two-hour (2) shift per week (or a total of twenty (20) hours in a three (3) month span) to assist museum staff in visitor services activities, and I will need to provide transportation accordingly.
- I understand that if my child is unable to attend a scheduled commitment, I will contact the Museum.

**Parent Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

## ACCIDENT WAIVER AND RELEASE OF LIABILITY FORM

**I HEREBY ASSUME ALL OF THE RISKS OF PARTICIPATING IN ANY/ALL ACTIVITIES ASSOCIATED WITH THE YOUTH TOUR AMBASSADOR**, including by way of example and not limitation, any risks that may arise from negligence or carelessness on the part of the persons or entities being released, from dangerous or defective equipment or property owned, maintained, or controlled by them, or because of their possible liability without fault.

I certify that I am physically fit, have sufficiently prepared or trained for participation in this activity, and have not been advised to not participate by a qualified medical professional. I certify that there are no health-related reasons or problems which preclude my participation in this activity.

I acknowledge that this Accident Waiver and Release of Liability Form will be used by the event holders, sponsors, and organizers of the activity in which I may participate, and that it will govern my actions and responsibilities at said activity.

In consideration of my application and permitting me to participate in this activity, I hereby take action for myself, my executors, administrators, heirs, next of kin, successors, and assigns as follows:

**(A) I WAIVE, RELEASE, AND DISCHARGE** from any and all liability, including but not limited to, liability arising from the negligence or fault of the entities or persons released, for my death, disability, personal injury, property damage, property theft, or actions of any kind which may hereafter occur to me including my traveling to and from this activity, **THE FOLLOWING ENTITIES OR PERSONS: Carbon County, Carbon County Commissioners, Carbon County Museum and Carbon County Fair Board** and/or their directors, officers, employees, volunteers, representatives, and agents, and the activity holders, sponsors, and volunteers;

**(B) INDEMNIFY, HOLD HARMLESS, AND PROMISE NOT TO SUE** the entities or persons mentioned in this paragraph from any and all liabilities or claims made as a result of participation in this activity, whether caused by the negligence of release or otherwise.

I acknowledge that these entities and their directors, officers, volunteers, representatives, and agents are **NOT** responsible for the errors, omissions, acts, or failures to act of any party or entity conducting a specific activity on their behalf.

I acknowledge that this activity may involve a test of a person's physical and mental limits and carries with it the potential for death, serious injury, and property loss. The risks include, but are not limited to, those caused by terrain, facilities, temperature, weather, condition of participants, equipment, vehicular traffic, lack of hydration, and actions of other people including, but not limited to, participants, volunteers, monitors, and/or producers of the activity. These risks are not only inherent to participants, but are also present for volunteers.

I hereby consent to receive medical treatment which may be deemed advisable in the event of injury, accident, and/or illness during this activity.

I understand while participating in this activity, I may be photographed. I agree to allow my photo, video, or film likeness to be used for any legitimate purpose by the activity holders, producers, sponsors, organizers, and assigns.

The Accident Waiver and Release of Liability Form shall be construed broadly to provide a release and waiver to the maximum extent permissible under applicable law.

**I certify that I have read this document and fully understand its content. I am aware this is a Release of Liability and a contract and I sign it of my own free will.**

\_\_\_\_\_  
Participant's Signature

\_\_\_\_\_  
Date

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

\_\_\_\_\_  
Age

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

(If under 18 years of age, Parent or Guardian must sign.)