

Application for Volunteers

PERSONAL INFORMATION

Full Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Work Phone: _____

Cell Phone: _____ E-mail Address: _____

Gender: _____ Are you 18 years or older? _____ If not, what is your age? _____

Have you ever *pled guilty* or been *convicted* of a crime? (A guilty plea or a conviction is not an automatic bar to volunteering). If so, state crime(s), date(s), court(s) and sentence(s). Omit minor traffic violations unless you are applying for a job that requires operation of a motor vehicle.

Are there any criminal charges now pending against you? (A pending criminal charge is not an automatic bar to volunteering). If so, state the charge(s) and court(s) and describe the current status.

Some volunteer positions require a background investigation. If you are able to be considered for one of those positions, a separate background investigation consent form will need to be completed.

EDUCATION/EMPLOYMENT

Name of School: _____

Name of Employer: _____ Phone: _____

Job Title: _____

Street Address of Employer: _____

City: _____ State: _____ Zip: _____

Name of Supervisor: _____

Would you like us to inform your school and/or employer of your volunteer services? _____

GENERAL INFORMATION

Special training, skills, hobbies: _____

Groups, clubs, organizational memberships: _____

Areas of volunteer interest: Office Park Maintenance Special Events Tour de Carmel
 Arbor Day Extended School Enrichment Program

Why do you want to volunteer? Serve my community Make new friends Service Hours
 Enjoy being outside Gives me something productive to do
 Other: _____

List the day(s) and time(s) you would be available for volunteering:

Monday: _____

Tuesday: _____

Wednesday: _____

Thursday: _____

Friday: _____

Saturday: _____

Sunday: _____

EMERGENCY CONTACT INFORMATION

Name of Emergency Contact: _____

Relationship of Emergency Contact: _____

Emergency Contact Phone Number(s): _____

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Please read the following carefully before signing this application

Code of Conduct

All participants & volunteers are expected to exhibit appropriate behavior at all times while participating, spectating, attending or volunteering for any program or activity sponsored by Carmel Clay Parks & Recreation. The following guidelines are designed to provide safe and enjoyable activities for all participants & volunteers.

Volunteers shall:

1. Show respect to all participants, fellow volunteers and program staff/supervisors.
2. Take direction from program staff/supervisors.
3. Refrain from using abusive or foul language.
4. Refrain from causing bodily harm to self, other volunteers, participants or program staff/supervisors.
5. Refrain from damaging equipment, supplies and facilities.

Photo & Video Policy, Acknowledgment and Authorization

_____ (initial). Photos and video footage are periodically taken of participants in a class, program or during a special event or at any Carmel Clay Park. All photos and video footage are the property of the Carmel/Clay Board of Parks & Recreation and are used in its Department publications and on its website. My initials evidence my acknowledgement of such ownership and authorization of such use.

Carmel Clay Parks & Recreation Waiver and Release

On my own behalf and on behalf of my heirs and assigns, I HEREBY RELEASE, WAIVE, DISCHARGE, COVENANT NOT TO SUE AND AGREE TO HOLD HARMLESS THE CARMEL/CLAY BOARD OF PARKS AND RECREATION, THE CARMEL/CLAY PARKS AND RECREATION DEPARTMENT, CITY OF CARMEL, CLAY TOWNSHIP, ITS AND THEIR OFFICIALS, OFFICERS, MEMBERS, INDEPENDENT CONTRACTORS, EMPLOYEES AND VOLUNTEERS (the "Releasees"), from any and all claims or liability for personal injury or property damage my child and/or I may cause or suffer directly or indirectly arising out of or relating in any respect to participation in a program or event provided by or made available through the Carmel/Clay Park and Recreation Department. This waiver and release of all claims, demands, action, and liability shall include, without limitations, any injury, damage or loss to person or property which may be (a) caused by any act, or failure to act, by Releasees even if said injury, damage, or loss results from the negligence of any or all of the above-identified Releasees or (b) sustained by me during the Carmel/Clay Parks and Recreation program or event in which I and/or my child participate(s).

SIGNATURE (parent or legal guardian if under 18)

DATE

SEND COMPLETED FORM TO:

Carmel Clay Parks & Recreation | ATTN: Sarah Carling
1235 Central Park Drive East, Carmel, IN 46032
P 317.573.5249 | F 317.573.5254 | E scarling@carmelclayparks.com



CONSENT/RELEASE FORM FOR BACKGROUND CHECK

Applicant's Full Name (print clearly): _____

Social Security Number: _____ Date of Birth: _____

Applicants Complete Address: _____

City: _____ State: _____ Zip: _____

I, _____, authorize and give consent for Carmel Clay Parks & Recreation to obtain the following information about me:

- Criminal background records/information
- National Sex Offender
- Addresses

I the undersigned, authorize this information to be obtained either via telephone, email or in writing in connection with my employment application. Any person, firm or organization providing information or records in accordance with this authorization is released from any and all claims of liability for compliance. Such information will be held in confidence in accordance with department procedures.

Print Name: _____ Date: _____

Signature: _____

For Department Use Only
To be completed by supervisor

Division: Administration

For: Employment Screening

Camps

Volunteer Screening

Maintenance

Recreation

Schools