

# Nampa Parks and Recreation Dept.



## VOLUNTEER APPLICATION

### Please check the box by the program for which you are volunteering

- Youth Programs: Basketball Baseball/Softball KIA Day Camp Preschool Other
- Adult Program: Basketball Volleyball Softball Flag Football Kickball Tours & Trips Outdoor Programs
- Parks: Basketball Service Project Scout Project Community Service
- Special Events: Harvest Classic Triathlon
- Others: Community Service Internship

Program /Activity applying for: \_\_\_\_\_ Please check if under 18

Name \_\_\_\_\_ Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Email \_\_\_\_\_

Phone (Home) \_\_\_\_\_ (Work) \_\_\_\_\_ (Cell) \_\_\_\_\_

Have you volunteered for this program before?  Yes  No

Will you have a child in the program?  Yes  No Name of child(ren) \_\_\_\_\_

Do you have any experience or training specific to this type of work?  Yes  No

Describe or list your previous experience as a volunteer in this position: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Describe any other experience you have that relates to this position: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

### References:

Please list names and contact information for two personal references other than family.

Name	Address	Phone	Relationship
_____	_____	_____	_____
_____	_____	_____	_____

*By applying with the Nampa Parks and Recreation Department to serve as a volunteer, I hereby consent to a background/criminal check at no cost to me.*

131 Constitution Way Nampa, Idaho 83686 (208) 468-5858

# Nampa Parks and Recreation Dept.



## VOLUNTEER APPLICATION

### Acknowledgement of Risk and Release

*I, the undersigned, agree for myself or for my minor child/ward, to volunteer for Nampa Parks and Recreation Department or Harward Recreation Center, and understand and agree to the following:*

1. I agree that I will perform my volunteer service to the best of my ability, and will not engage in reckless or dangerous behavior while acting as a volunteer. I understand that as a volunteer I am required to follow the policies, procedures, rules for safety and any other regulations pertaining to the program(s) in which I volunteer.

2. I acknowledge that there are inherent dangers, hazards and risks associated with sports and activities in which I may serve as a volunteer. By accepting a volunteer position, I knowingly choose to assume all risks associated with such activities or sports including without limitation risk of injury or death. In addition, I assume all risk of damage or loss sustained to my property. I further agree and acknowledge that by assuming the risk of participation in the Nampa Recreation Department activities, I will not bring any action, claim or lawsuit against Nampa Parks and Recreation for injury, death or damage to my person or property arising, either directly or indirectly, from my role as a volunteer.

3. In the event of any emergency, I authorize Nampa Parks and Recreation Department officials to secure from any licensed hospital, physician and/or medical personnel any treatment deemed necessary for my immediate care, including ambulance transport. Further, I agree that I will be responsible for payment of any and all medical services rendered, and will indemnify and defend Nampa City Parks and Recreation from claims, liens, charges, costs, or suits that arise as a result of any medical treatment or assistance I receive.

4. I understand that I am working at all times on a voluntary basis, and will not receive any compensation for my services. I realize that by volunteering for Nampa Parks and Recreation I am not employed by, nor am I an employee of the Nampa Parks and Recreation Department and/or the City of Nampa.

5. My relationship with the Nampa Parks and Recreation Department as a volunteer can be canceled or terminated at any time by the Department or by me, for any or no reason.

*I have read and understand the Nampa Parks and Recreation Department "Acknowledgement of Risk and Release". Any minor's signature must be accompanied by the signature of a parent or legal guardian, whose signature shall constitute consent for said minor to volunteer with Nampa Parks and Recreation. Any person signing below further acknowledges that he or she has received, read and understands the Nampa Parks and Recreation Department Volunteer Policy.*

Volunteer's Name (printed) \_\_\_\_\_

Signature of parent or guardian (if volunteer is a minor) \_\_\_\_\_

Volunteer Signature \_\_\_\_\_ Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_



# Nampa Parks & Rec Department



## — VOLUNTEER BACKGROUND CHECK RELEASE AND AUTHORIZATION —

*Please use complete legal information, do not use nicknames or abbreviations.*

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_

Current Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Date of Birth (mo/day/year): \_\_\_/\_\_\_/\_\_\_\_ SSN#: \_\_\_\_\_

Current Employer: _____	Position: _____
Supervisor: _____	Title: _____
Have you been convicted of a criminal offense since your 18th birthday? <input type="checkbox"/> YES <input type="checkbox"/> NO	
If yes, please explain: _____	
_____	
_____	
Please list and explain any other names you have used (include aliases, maiden names): _____	
_____	
_____	
_____	

I certify that all statements made on this application are true and complete. I authorize any individual, company, organization or institution to release any and all information concerning statements made by me on this application, and I do hereby release all parties and individuals connected therewith from all liabilities for any damages whatsoever incurred in furnishing such information. I agree and understand that any deliberate misstatement or omission will cause forfeiture of all eligibility to volunteer with the Nampa Recreation Department, Recreation Center or Parks Department. I also hereby give my permission for the Nampa Parks and Recreation Department and or Harward Recreation Center and/or its agent, to conduct a criminal history check and to forward any and all information obtained to the volunteer coordinator. I understand that this information may be used for specific purpose of eval-uating my fitness for duty, and that continued service as a volunteer may be contingent upon satisfactory completion of this back-ground investigation. My signature below acknowledges my understanding and agreement with the above.

Signature \_\_\_\_\_ Date \_\_\_\_\_