PHILOMATH YOUTH ACTIVITIES CLUB

VOLUNTEER APPLICATION



NAME:							
PHYSIC	AL STREET ADDRESS:						
CITY:		STATE: ZIP:					
PHONE #:		SSN:					
EMAIL A	ADDRESS:						
Please in	ndicate below the programs with	which you are interested in volunteering:					
□ Fo □ Ba □ Ba	olleyball ootball asketball aseball / Softball fficiating (which sport):	☐ STARS ☐ Fun in the Sun ☐ Clemens Clubhouse ☐ Firewood Fundraiser ☐ Other:					
Certifica	ations:						
1. N	FHS Concussion in Sports Yes No Expiration Date:	3. Standard First Aid Card ☐ Yes ☐ No ☐ Expiration Date:					
2. N	FHS Fundamentals of Coaching Yes No Expiration Date:	4. CPR Card ☐ Yes ☐ No					
Previous	s Youth Volunteer Experience:						
1. O 1	b. Supervisor's Name:						
2. O i	a. Role: b. Supervisor's Name:						
3. O t	c. Phone #: rganization: a. Role: b. Supervisor's Name: C. Phone #:						

References (not including relatives): 1. Name: a. Relationship: b. Phone #: 2. Name: a. Relationship: b. Phone #: _____ 3. Name: _____ a. Relationship: _____ b. Phone #:_____ **Background Inquiry:** The following questions are being asked to safeguard the well-being of the youth that we serve. This is part of a national effort to ensure the safety of all children in youth development programs across the country. All volunteers are required to answer these questions and to consent to a Criminal History Background Check. 1. Have you ever been terminated from a volunteer position? □ No □ Yes 2. Do you have any physical or mental conditions which may limit your ability to perform as a coach/volunteer? □ No ☐ Yes ☐ If yes, explain: I certify that all of the answers given by me to all of the questions on this application are true to the best of my knowledge, and that I have not withheld any information. I also understand that any omission, misrepresentation, or false information submitted in connection with this application may result in refusal or dismissal of my volunteer position. I hereby agree that the Philomath Youth Activities Club ("PYAC") may make inquiries to confirm any of the above information, as well as the information I provided on the next page, including but not limited to a routine criminal background check. **Liability Release:** I understand and assume all of the risks of participation in all PYAC programs. I agree to waive, release, and forever discharge any claim for injury or damage for myself or my heirs, and to hold harmless the Philomath Youth Activities Club agents, employees, sponsors, against any claim, loss, liability expense, including attorney's fees resulting directly or indirectly from participation in the program.

CRIMINAL HISTORY VERIFICATION OF APPLICANTS

(TYPE OR PRINT CLEARLY)

Name: List other names previously used:		Date of Birth (DO			_ Sex:	
Social Se	ecurity #:	Address:				
City:		State:	Zip:			
County:	I	Email:				
1. I	Have you ever been convicted of a sex-			□Yes		
	If yes, did the crime involve for	ce or minors?		□ Yes	⊔ No	
2. I	Have you ever been convicted of a crim	ne involving violence or th	ne threat of violence?	□ Yes	□No	
3. I	Have you ever been convicted of a crim	ne involving drugs or alcol	holic beverages?	□ Yes	□No	
	Have you ever been convicted of any cr If yes, specify crime:			□ Yes	□ No	
	Have you ever been arrested for a crime If yes, specify charge:	•		ismissal? □ Yes	□ No	
6. I	For any of the above questions answere	ed "Yes," specify in which	state the convictions occ	urred:		
7. I	Do you have an open or founded DHS	case of child abuse or ne	glect involving a minor?	□ Yes	□ No	
I hereby	ARATION: grant The Philomath Youth Activition made on this form.	ies Club permission to ch	neck civil and criminal red	cords to v	erify any	
Applicant's Signature		 Da	nte		_	
Regardle a crimina is entitle on the b concerni Building	ess of whether the applicant grants constal offender record check of applicants to d to review his/her criminal history for easis of arrest records alone may violate ing the applicant's rights by contacting to grant the supplicant's rights by contacting to grant 1070; Portland, Oregon 97232; to solve 1070; Portland, Oregon 97232	o THE PHILOMATH YO inaccurate or incomplete i federal civil rights law. Th the Bureau of Labor and In	OUTH ACTIVITIES CL nformation. Discriminati he applicant may obtain fond ndustries; Civil Rights Div	UB. The a on by an e urther info	applicant employer ormation	
Applica	nt's Signature		ite		_	