City of Wyoming Parks and Recreation Volunteer Application Form

CIRCLE AREAS OF INTEREST: **SENIORS** **PARKS** **RECREATION** **T.E.A.M.21**

Name_____ Maiden Name:_____
(LAST) (FIRST) (MIDDLE)

Address_____ City_____ State_____ Zip_____

Prior address_____ City_____ State_____ Zip_____
(if you have lived at above address for less than 5 years)

Home Phone_____ Work Phone_____ E-Mail Address_____

Driver's License Number_____ State_____ Expiration_____

Gender _____ Date of Birth _____ Race _____

Parent's Names (IF APPLICANT UNDER 18)_____ Phone_____

Contact In Case of Emergency:

_____
(Name) (Relationship) (Phone)

Personal Or Professional References (Please Exclude Relatives)

1. Name_____ Relationship_____ Phone_____

   Address_____ City_____ State _____ Zip_____

2. Name_____ Relationship_____ Phone_____

   Address_____ City_____ State_____ Zip_____

Please indicate reason for interest in being a volunteer:

_____
_____
_____

Please list any skills, foreign languages, hobbies, or interests you have that might be helpful in your volunteer work:

_____
_____
_____

Availability:	Mon.	Tues.	Weds.	Thur.	Fri.	Sat.	Sun.
Morning	_____	_____	_____	_____	_____	_____	_____
Afternoon	_____	_____	_____	_____	_____	_____	_____
Evening	_____	_____	_____	_____	_____	_____	_____

Office Use Only
PSOR _____ Date_____

Criminal Records _____ Date _____

Continued on back

Applicants Authorization & Agreement

(Please read the following carefully before signing)

I hereby certify that all statements on this application are made truthfully, and further understand and agree that such statements may be investigated and if found to be false will be sufficient reason for not being accepted as a volunteer, or if accepted may result in my dismissal.

I authorize the City of Wyoming to secure additional relevant information from my employer, prior employer, educational institution or any other persons or organizations concerning my employment, education, disciplinary information or any other relevant information, personal or otherwise, and release all parties from all liability for any damage that may result from furnishing this information to the City of Wyoming.

In accordance with A.D.A. requirements, if I require special accommodations to perform my services, I must notify the Wyoming Parks and Recreation Department of that need within 182 days after I knew or reasonably should have known that special accommodations were needed. Failure to do so will bar me from alleging that the City of Wyoming has not accommodated me as required by law.

I hereby authorize the City of Wyoming to secure a criminal conviction history from the appropriate law enforcement agencies, should the City determine it necessary to do so. In addition, I will furnish the necessary identification for such an investigation to take place.

I hereby grant the City of Wyoming permission to use and display my likeness in photographs(s)/video in any publication, multimedia production, display, advertisement or World-Wide Web publication for Wyoming Parks and Recreation or its constituent departments.

I agree to abide by all program rules and regulations set forth by the Wyoming Parks and Recreation Department. I understand that my volunteer services may be terminated at any time by that department. I also understand that there are certain inherent risks involved in any activity. I hereby release, discharge and hold harmless the City of Wyoming and its officers, employees, volunteers, contributing sponsors and affiliate organizations from any and all liability for any physical or mental injury or aggravation of any pre-existing condition, illness or disability, death, loss of enjoyment or any other harm or loss of any nature which may be sustained by me while serving as a volunteer for the Wyoming Parks and Recreation Department.

Please print name with one letter in each box.

First Name | Last Name

_____ Date_____

Applicant's Signature

Please print name with one letter in each box.

First Name | Last Name

_____ Date _____

Parent's Signature (If Applicant Under 18)

*Your signature indicates your approval for your child's participation as a volunteer in this program.

If you have any questions or concerns regarding this application, please call our office at (616) 530-3164.

The Wyoming Parks and Recreation Department promotes a non-discrimination policy that ensures participation for all regardless of race, religion, sex, economic status or disability.