

# City of Milford Connecticut Recreation Department Consent / Waiver Form

**Official 2011 - 2012 Volunteer Application (Complete BOTH Pages) Do NOT use forms from past years.**

PLEASE NOTE: A copy of a valid government-issued photo identification must be attached to this application.

Name: \_\_\_\_\_ Date: \_\_\_\_\_ Special professional training, skills, hobbies: \_\_\_\_\_

Prior/Maiden Names or Aliases: \_\_\_\_\_

Address: \_\_\_\_\_ Community affiliations (Clubs, Service Organizations, etc.): \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Previous/current volunteer experience (e.g. baseball/softball and years): \_\_\_\_\_

Mailing Address (if different): \_\_\_\_\_

Previous states resided in the past 5 years: \_\_\_\_\_ Do you have children in the program? YES \_\_\_\_\_ NO \_\_\_\_\_

Date of Birth: \_\_\_\_\_ If yes, at what level? \_\_\_\_\_  
(mm / dd / yyyy)

Social Security Number: \_\_\_\_\_ Special Certification (i.e. CPR, Medical, etc.): \_\_\_\_\_

Occupation: \_\_\_\_\_ Have you ever been charged or convicted of a felony? YES \_\_\_\_\_ NO \_\_\_\_\_

Employer: \_\_\_\_\_ If yes, explain (use additional page to explain in detail): \_\_\_\_\_

Address: \_\_\_\_\_ Have you ever been charged or convicted of **any** crime involving or against a minor? YES \_\_\_\_\_ NO \_\_\_\_\_

Do you have a valid driver's license? YES \_\_\_\_\_ NO \_\_\_\_\_

Driver's License#: \_\_\_\_\_ State: \_\_\_\_\_

Conference/League Name: \_\_\_\_\_ Have you ever been refused participation in any other youth programs? YES \_\_\_\_\_ NO \_\_\_\_\_

Association Name: \_\_\_\_\_ If yes, explain (use additional page to explain in detail): YES \_\_\_\_\_ NO \_\_\_\_\_

**In which of the following would you like to participate? ("X" one or more.)**

League Official: \_\_\_\_\_ Head Coach: \_\_\_\_\_ Board Member: \_\_\_\_\_ Equipment Manager: \_\_\_\_\_ Assist. Coach: \_\_\_\_\_

Team Mom: \_\_\_\_\_ Coach Trainee: \_\_\_\_\_ Trainer: \_\_\_\_\_ Student Demo: \_\_\_\_\_

Other: \_\_\_\_\_

**Privacy Policy: Please be advised that Milford Recreation Department does not sell or release contact information to any non-affiliated organization.**

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Please list three references, aside from family members, at least one of which has knowledge of your participation as a volunteer in a youth program:

<u>Name:</u>	<u>Nature of Relationship:</u>	<u>Phone #:</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

I hereby swear and attest that all information provided on this application is true and complete to the fullest extent of my knowledge. If I am accepted as a volunteer, the Milford Recreation Dept. may end the relationship if I have made any false statements or material misrepresentations, written or verbal. As a condition of volunteering, I hereby grant permission to the Milford Recreation Dept. to conduct a background check on me, which may include a review of database records including but not limited to sex offender registries, child abuse and criminal history records in compliance with the Milford Recreation Dept.'s child protection policy. I understand and agree that, if appointed, my position is conditional upon the league receiving no inappropriate information on my background. I further agree to report in writing to the Recreation Director any changes to this application that occur after being approved as a volunteer coach. I hereby release and agree to hold harmless from liability the City of Milford, the Milford Recreation Dept., the officers, employees and volunteers thereof, and/or any other person or organization that may provide such information.

I also understand that, regardless of previous appointments, the Milford Recreation Department is not obligated to appoint me to a volunteer position. I understand that, prior to the expiration of my term, I am subject to suspension by the Recreation Director and removal by the Park, Beach, and Recreation Commission for any and all violations of the Milford Recreation Department policies or principles.

\_\_\_\_\_  
**Applicant Signature**

\_\_\_\_\_  
**Date**

**Applicant Name (Print or Type):** \_\_\_\_\_

NOTE: The Milford Recreation Department will not discriminate against any person on the basis of race, creed, color, national origin, marital status, gender, sexual orientation or disability.

**For Local Use Only.** Below please print the **legal name** of the individual who performed the background check on the applicant and name of the local organization.

Background check completed by Recreation officer: \_\_\_\_\_  
or  
Background check completed by City of Milford officer: \_\_\_\_\_  
or  
completed by: \_\_\_\_\_ Date Completed: \_\_\_\_\_

**System(s) used for background check (minimum of one must have "X"):**

Online multistate database: \_\_\_\_\_ State/Federal Criminal History Records: \_\_\_\_\_ FEDERAL Sex Offender Registry \_\_\_\_\_ Other (please explain): N.E.C.F.LLC  
(Choicepoint, etc.)

**New England Computer Forensics, LLC**

**Copies of background check will be maintained for the duration of the volunteer's service.**