

**Rockdale County Parks and Recreation Division
Volunteer Application**

Name _____ Date _____

Home Address: _____

Street Address City State Zip Code

Work # _____ Cell Phone/Pager _____

Evening Phone # _____

Email Address _____

Present Occupation _____

Describe Position _____

Volunteer Information/Special Interests Training

What type of hobbies/interest do you have that would be helpful in your volunteer experience (i.e. Arts and crafts, sports, dance, working with youth, adults, nature/gardening, working with people with disabilities, special events, etc)? _____

List any course work, training, which may be applicable (i.e. CPR, First Aid, etc.)

Is your volunteer work to be used towards credit or fulfillment of a community service or school service learning? _____ Yes _____ No

Please describe: _____

Please not any medical conditions or concerns (i.e. Asthma, allergies, heart conditions, etc) _____

I, the undersigned, certify that the information stated on this application is true, complete and correct to the best of my knowledge and belief and is made in good faith. Any false statements made by me may be used as a basis of rejection for the application.

Volunteers Signature: _____ Date _____

VOLUNTEERS MUST PROVIDE THEIR OWN TRANSPORTATION.

It is the intent of the Department to provide equal opportunity to all volunteers, in all terms, privileges and conditions without regard to sex, race, religion, national origin, physical disability, or any other factor. State law requires that all persons working with minors undergo a background investigation.

Thank you for taking the time to complete this application. We look forward to working with you and appreciate the generous offer of your time and skill.

Volunteer Agreement/ Release
Rockdale County Parks and Recreation Department

As a volunteer with the Rockdale County Parks and Recreation Department, the lasting impression you make on those you serve reflects directly on all of us. Please be sure your works and deeds will help build our program and its reputation for quality.

I, _____, agree to perform the volunteer duties to which I am assigned to the best of my ability and in a professional manner. I understand that as a volunteer, authorized by the Rockdale County Parks and Recreation Department, acknowledge that there may be certain risks related to this Activity. I hereby state and affirm that:

1. In consideration of being allowed to take part in this Activity, I agree to release and hold harmless the Department, its officers, employees, and agents, from all liability for any harm or injury that I may incur as a result of participating in the Activity, excluding proven gross negligence, by the Department.
2. By way of this form, I authorize the Department staff to assist me by administering basic first aid and/or obtain appropriate emergency medical treatment for me in the event of an accident, injury, or illness.
3. I understand that I may be subject to falls, slips, cuts and bruises, and may be at risk for this particular Activity.
4. Unless I indicate otherwise in writing, the Department for publicity purposes may take photographs, videotapes, or audiotapes of me during the course of the Activity for use. My first name is the only personal information about me that could be release by the Department in the use of the above-mentioned media.
5. The terms of this Agreement shall be binding on my heirs, executor, administrator and all members of my family.

I agree to accept the following assignment (complete after placement)

Program/Event

Location and Supervisor's name _____

Hours _____ Beginning date _____ Length of event _____

Emergency contact name, address and phone number _____

Volunteer Signature _____ Date _____