

Recreation Council Volunteer Application

A public records check will be completed on recreation council volunteers.

Full Legal Name _____

Address _____

Recreation Council Name: _____

Phone: Day () _____ - _____ Evening () _____ - _____

E-mail Address: _____

Emergency Contact Name: _____ Phone Number: () _____ - _____

Age: Under 14 yrs. _____ 14-17 yrs. _____ 18 yrs. and older _____

Date of Birth: Month _____ Day _____ Year _____

I have lived in Maryland for (check one) 10 or more years, less than 10 years.

Please list specific interests and experience relevant to the volunteer position.

Have you ever been convicted of a crime? Yes, No (If yes, explain below.)

Waiver of Liability: By my signature below, I acknowledge that there are inherent risks and dangers associated with recreation programs, and therefore, I hold Frederick County Commissioners, of Frederick County Maryland, and its agents harmless from all claims for injuries, damage, or loss which may result from my, or my child(ren)'s, volunteering on behalf of this recreation council.

Background Check: In connection with my application to become a volunteer with _____ ("Council"), I authorize _____ ("Council") to request a consumer and/or investigative consumer report on me. Such reports may include, but are not limited to, information as to my character, general reputation, personal characteristics, and mode of living; discerned through employment and education verifications; personal references and interviews; my personal credit history based on reports from any credit bureau; my driving history, including any traffic citations; present and former addresses; criminal and civil history/records; and any other public record.

I authorize any person, business entity or governmental agency that may have information relevant to the above to disclose the same to _____ Council and the Frederick County Division of Parks and Recreation, including, but not limited to, any and all courts, public agencies, law enforcement agencies and credit bureaus. I authorize this Council to share such information only with parties in interest who have a "need to know" such information to protect them and their volunteers/participants/employees. The Council does not sell or otherwise provide any of the information found in its background investigations to any party outside the Association of Frederick County Recreation Councils.

Signature _____ Date ____/____/____

(Parent must sign if applicant is under 18 years of age)