



Conejo Recreation & Park District

Volunteer Application

Applicant Information

Full legal name:	Date:	
Home address:		
Home phone:	Work Phone:	Cell phone:
Email address:		
Best way to contact me: <input type="checkbox"/> home <input type="checkbox"/> work <input type="checkbox"/> cell <input type="checkbox"/> email <input type="checkbox"/> text		
Employer/school name:		Occupation:
Would you like us to be aware of any physical or medical conditions?		

Emergency Contact Information (minors must list parent/guardian)

Emergency contact name:	Relationship to you:
Emergency contact phone number(s):	

General areas of Interest:

Activity(s) of interest and/or special skills that I have: (check all that apply)

<input type="checkbox"/> One time special events
<input type="checkbox"/> Coaching
<input type="checkbox"/> Program leadership
<input type="checkbox"/> Program assistance
<input type="checkbox"/> Receptionist
<input type="checkbox"/> Office/clerical
<input type="checkbox"/> Data entry/word processing
<input type="checkbox"/> Social Media
<input type="checkbox"/> Special projects

<input type="checkbox"/> Fundraising
<input type="checkbox"/> Developing written materials
<input type="checkbox"/> Computer graphics
<input type="checkbox"/> Citizen advisory group
<input type="checkbox"/> Focus group (topic _____)
<input type="checkbox"/> Interpretation/Naturalist/Docent
<input type="checkbox"/> Photography
<input type="checkbox"/> Other special skill _____



Conejo Recreation & Park District

Center or Program Area(s) of Interest (check all that apply)			
<input type="checkbox"/> Borchard Ctr	<input type="checkbox"/> Thousand Oaks Ctr	<input type="checkbox"/> Arts/Cultural	<input type="checkbox"/> Senior Ctr
<input type="checkbox"/> Conejo Ctr	<input type="checkbox"/> Sports	<input type="checkbox"/> Outdoor Unit	<input type="checkbox"/> Teen Ctr
<input type="checkbox"/> Dos Vientos Ctr	<input type="checkbox"/> Aquatics	<input type="checkbox"/> Individuals with disabilities (Therapeutics)	
<input type="checkbox"/> Reign of Terror (18+ yrs)	<input type="checkbox"/> Parks Division	<input type="checkbox"/> COSCA Rangers	<input type="checkbox"/> PLAY Conejo (501©3)

Preferred age groups for volunteer experiences (check all that apply)				
<input type="checkbox"/> Youth (3-7)	<input type="checkbox"/> Youth (8-12)	<input type="checkbox"/> Teen	<input type="checkbox"/> Adult	<input type="checkbox"/> Senior

Time of Day/ Day of week preferred (check all times available to volunteer)						
Approximate # of hours per week desiring to volunteer:						
<input type="checkbox"/> Mon	<input type="checkbox"/> Tues	<input type="checkbox"/> Wed	<input type="checkbox"/> Thurs	<input type="checkbox"/> Fri.	<input type="checkbox"/> Sat	<input type="checkbox"/> Sun
<input type="checkbox"/> early morning	<input type="checkbox"/> mid day	<input type="checkbox"/> early afternoon	<input type="checkbox"/> late afternoon	<input type="checkbox"/> evenings		
Other:						

Do you have any family members participating in the program for which you would like to volunteer? ☐ yes ☐ no

If yes, please provide the name of the participant(s):

For staff use only

Waiver and release completed/on file <input type="checkbox"/> yes initials:_____	Parental consent signed: <input type="checkbox"/> yes <input type="checkbox"/> n/a
Appropriate background check submitted: (date)	_____Initials of staff person
Background check cleared prior to volunteer duties: (date)	_____Initials of staff person



Conejo Recreation & Park District

Volunteer Agreement, Waiver, and Release

Activity Name

Activity Date(s)

In consideration for being permitted by the Conejo Recreation and Park District to participate in this volunteer assignment/activity, I hereby waive, release and discharge any and all claims for damages for personal injury, death, or property damage which I may have, or which may hereafter accrue to me, as a result of participation in the assignment/activity. I fully understand that my participation in this volunteer assignment/activity exposes me to the risk of personal injury, death, communicable diseases, illnesses, viruses, and/or property damage. I hereby acknowledge that I am voluntarily participating in this activity and agree to assume any such risks.

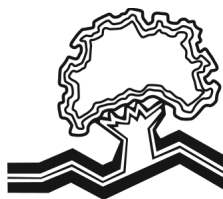
This release is intended to discharge in advance the Conejo Recreation and Park District, its officers, employees, volunteers, and agents from any and all liability arising out of or connected in any way with participation in the volunteer assignment/activity, even though that liability may arise out of active or passive negligence or carelessness on the part of the persons or entities mentioned above. It is further agreed that this waiver, release, and assumption of risk is to be binding on my heirs, administrators, executors, and assigns.

I agree to indemnify and to hold Conejo Recreation and Park District, its officers, employees, volunteers, and agents free and harmless from any loss, liability, damage, cost or expense which they may incur as the result of my death or any injury or property damage that I may sustain, or cause, while participating in the volunteer assignment/activity.

I agree to indemnify and to hold Conejo Recreation and Park District, its officers, employees, volunteers, and agents free and harmless from any health related injuries or death, arising from any person claiming to have contracted, or demonstrating contraction of, COVID-19, or any related sickness or ailment as the result of participating in the volunteer activity or entering District property. I understand that in volunteering my time and services for the Conejo Recreation & Park District, I agree to follow Center of Disease Control (CDC), local health district guidelines, and Conejo Recreation & Park District's policies and procedures to reduce the spread of Novel Coronavirus, or COVID-19.

I certify that all statements on this application are true and correct to the best of my knowledge. I understand that the information I provide may be verified, and I give permission to the Conejo Recreation and Park District to make inquiry of others concerning my suitability to act as a volunteer. I also understand that a criminal background check may be accomplished if that action is deemed necessary. I understand that any false statements will disqualify me from the District's volunteer program. I understand that while volunteering for the Conejo Recreation and Park District, I may be dealing with confidential information and I agree to keep said information in the strictest confidence.

I am aware that the relationship between the Conejo Recreation and Park District and a volunteer is an "at will" arrangement, and that it may be terminated at any time without cause by either the volunteer or the Conejo Recreation and Park District. Further, I understand that as a volunteer, I am offering my services of my own free will without any expectation of compensation, health or life insurance, or other employee benefits of any kind.



Conejo Recreation & Park District

PHOTOGRAPHIC RELEASE

I understand that photographs may be taken during this activity and hereby grant the Conejo Recreation and Park District permission to use any such photo(s), my likeness, voice, and words in television, radio, film, or in any form to promote activities of the Conejo Recreation and Park District.

PARENTAL CONSENT

Parental consent is required if volunteer is under 18 years of age.

I hereby consent that my son/daughter, _____, participate as a volunteer with the Conejo Recreation and Park District in the above referenced activity, and I hereby execute the above Agreement, Waiver, and Release on his/her behalf.

AUTHORIZATION FOR MEDICAL TREATMENT

As the participant or the parent, legal guardian, or appointed conservator of the participant of this program, I hereby give consent to the Conejo Recreation & Park District to obtain all medical or dental care for myself or my dependent as prescribed by a duly licensed medical professional. This care may be given for whatever conditions are necessary to preserve the life, limb, and well-being of myself or my dependent.

I HAVE CAREFULLY READ THIS AGREEMENT, WAIVER, AND RELEASE AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT THIS IS A RELEASE OF MY LIABILITY AND A CONTRACT BETWEEN MYSELF AND THE DISTRICT AND I SIGN IT OF MY FREE WILL.

Volunteer or Parent/Guardian Signature

Full Name (Printed)

Date