

Recreation and Parks Department Volunteer Application, Release, and Consent

I hereby apply to be a volunteer for the Johns Creek Recreation & Parks Department. I understand that if selected to be a volunteer I may not receive any financial compensation for my time and that I am responsible for my expenses. I further understand that my services as a volunteer will not be for any specific length of time or duration.

I understand that in order to be considered for a volunteer opportunity I must first successfully pass a background screening process. I hereby authorize the City to receive any criminal history on file pertaining to me from any federal, state, or local criminal justice agency. I understand that other criteria will be evaluated by the City to determine my ability to carry out the duties and responsibilities related to my application to be a volunteer. I understand that if selected to be a volunteer it is a privilege, not a right, and that as a volunteer for the City of Johns Creek, I would be an ambassador for the City and therefore would represent myself professionally and with integrity at all times. I would adhere to the terms and conditions as set forth for the volunteer opportunity for which I am applying.

I acknowledge the risk of injury while performing volunteer services for the City of Johns Creek, and I knowingly assume those risks; I accept the responsibility for my participation, including transportation to and from all activities associated with my volunteer services, and I represent that I am in sufficient good health and physical condition to undertake my volunteer services.

I release, discharge, indemnify and hold harmless to the fullest extent permitted by law, the City of Johns Creek, the City of Johns Creek Recreation and Parks Department, and their respective officials, officers, employees, sponsors, organizers, supervisors, volunteers, participants and agents, from any and all claims, actions, or causes of action of whatever kind and nature, including claims for property damage, bodily injury or death, arising out of, or sustained as a result of, my participation as a volunteer for the City of Johns Creek.

I consent that my name, photograph, image, and/or likeness may be used, in perpetuity, by the City of Johns Creek for promotional and information purposes in print, on the City website, and in other media.

PRINT FULL NAME	SIGNATURE	DATE
ADDRESS	CITY STATE ZIP	
PHONE: (H) (W)	EMAIL:	
APPLYING TO VOLUNTEER FOR (SPORT/ACTI	VITY)	
How long have you lived in the state of Georgia?		
If less than 5 years, please list your most recent out-o	f-state resident	
address:		
Have you ever been convicted of a criminal offense? Have you ever been convicted of a crime involving b		□YES
checks or stolen money?	\square NO	□YES
Have you ever been convicted for use or sale of illegated Has your driver's license ever been suspended or reve		□YES □YES
Have you ever been convicted of child neglect or abu		□YES
	ise?	□YES