

**ROCKY RIVER RECREATION DEPT.
895-2599 Civic Center**

Date: _____ / _____ / _____

YOUTH VOLUNTEER APPLICATION FORM

- The Recreation Dept. utilizes a small number of youth volunteers to help with some of our programs and classes, including Summer Day Camp, Summer Preschool Camps, some swimming classes, and some preschool & elementary sports programs.
 - The 1st step is to complete the application and return it to the Civic Center.
 - Volunteers serve at the discretion of the program supervisor or head instructor.
 - Volunteers do not work all class hours – we will schedule them around our needs and their availability.
 - Day Camp: volunteers must have completed 8th grade; other programs: volunteers must have completed 6th grade.
 - You will be contacted if we are able to use you for one of our programs.
 - Thank you!

Do you have a specific class/program/sport you would like to volunteer for?
Please list preferences, or no preference:

Your Name _____

Address _____
street _____ city _____ zip _____

Home Phone _____ Cell Phone _____

E-mail (please print clearly) _____

School _____ Grade _____ Birthdate: ____/____/____

Please answer the following questions (briefly):

1. Please list any experience you have with supervising kids, babysitting, helping others, etc.
2. Why do you want to volunteer for the Recreation Dept?
3. Please list the name & phone of a neighbor, teacher or other adult who knows you that we may contact for a character reference:
4. List days and times you are generally available.
5. Name & phone of person to contact in an emergency:

Must be signed by the volunteer and by parent if student is under age 18.

WAIVER FOR TO VOLUNTEER: In consideration of the City of Rocky River accepting _____ to volunteer for the Rocky River Recreation Department, I hereby for myself, my child, my heirs, executors, and administrators, waive and release any and all rights and claims for damages I or my child may have against the City of Rocky River Recreation Dept., its employees and agents. I do hereby hold the City of Rocky River blameless of and from any and all liability which may arise out of or result from participating as a volunteer for the Recreation Department.

I understand that as a volunteer, I am a representative of the Rocky River Recreation Department and as such, will conduct myself in a conscientious and professional manner.

Signed: _____ Date: ____/____/_____
Volunteer

Parent Signature: _____ Date: ____/____/_____
Required if volunteer is under age 18