

APPLICANT'S CERTIFICATION, AGREEMENT, WAIVER OF LIABILITY & RELEASE OF CLAIMS

(Please read the following information carefully before signing this document)

The Village of Groveport Parks & Recreation Department promotes a non-discrimination policy that ensures participation for all regardless of race, religion, sex, economic status, or disability. In accordance with A.D.A. requirements, if I require special accommodations to perform my services, I must notify the Village of Groveport Parks & Recreation Department of that need within 182 days after I knew or reasonably should have known that special accommodations were needed. Failure to do so will bar me from alleging that the Village of Groveport has not accommodated me as required by law.

I hereby certify that all statements on this application are made truthfully and without evasion, and further understand and agree that such statements may be investigated and if found to be false, will be sufficient reason for not being accepted as a volunteer, or if accepted, may result in my dismissal.

Should the Village determine it is necessary to do so, I authorize the Village of Groveport to secure additional information from my employer, prior employer, educational institutions, or any other persons or organizations which may give the Village of Groveport information concerning my employment/educational accomplishments, disciplinary information, or any other personal information they may have, personal or otherwise, and release all parties from all liabilities for any damage that may result from furnishing this information to the Village of Groveport.

In consideration of serving as a volunteer coach with the Village of Groveport, I am hereby requesting a local and state background history on myself. I understand that this is only a State of Ohio background check. If necessary, I will furnish necessary identification, i.e., fingerprints, driver license, and social security number, for such an investigation to take place. I hereby authorize the Village of Groveport Parks & Recreation Department to release any information it may have in its records or may obtain from other sources under my own name and birth date, including my fingerprints, and I hereby release and forever discharge the Village of Groveport and its agents, its officers and employees from any and all actions, causes of actions, claims and demands for, upon or by reason of any damage, loss or injury, which may be sustained by me in the nature of libel, slander, invasion of privacy or other results from errors or omissions in the information given or from the use of the information, whether by reason or unauthorized use, negligence or otherwise.

I agree to abide by all program rules and regulations set forth by the Village of Groveport Parks & Recreation Department. I understand that my volunteer services may be terminated at any time by the Village of Groveport Parks & Recreation Department. I also understand that there are certain inherent risks involved in any activity. I do hereby waive, relinquish, release, discharge, and hold harmless the Village of Groveport Parks & Recreation Department and its employees, volunteers, contributing sponsors, and affiliate organizations from any and all liability for any physical or mental injury or aggravation of any pre-existing condition, illness or disability, death, loss of enjoyment, or any other harm or loss of any nature which may be sustained by me while serving as a volunteer for the Village of Groveport Parks & Recreation Department.

Please print name:

(Last Name)

(First Name)

(Middle Initial)

(Maiden/Alias)

Signature (Parent or Legal Guardian if under the age of eighteen)

Date

Social Security Number

Sex (Male or Female)

Driver's License Number

Date of birth

FOR VILLAGE OF GROVEPORT - PARKS & RECREATION DEPARTMENT USE ONLY

_____ No records were found for the above named individual.

_____ Authorized to coach

_____ The local history was on file and released.

_____ Unauthorized to coach

Records check completed by: _____

Date: _____