

City of Manteca Parks and Recreation Department

252 Magnolia Avenue • Manteca, CA 95337 Phone (209) 456-8600 Fax (209) 923-8954

VOLUNTEER APPLICATION

Community Ambassadors for Manteca Parks and Recreation Services (CAMPRS)

Thank you for expressing an interest in volunteering for the Community Ambassadors for Manteca Parks and Recreation Services (CAMPRS). We take great pride in our parks, programs, and services. CAMPRS provide a community branch of service delivery that helps to ensure the most efficient and effective use of community resources. If you or someone you know would be interested in helping in any of the following areas, please complete this form and return it to the Manteca Parks and Recreation Department at the above address. Volunteers must be at least 16 years old; however, younger children can accompany a parent or guardian with our Family Programs.

Please check areas in which you would be interested in volunteering:

Special Events	\Box Ambassadors in Parks	Youth Programs	Youth Sports Coach*			
🗆 Adopt-A-Park	Office Assistant	Family Programs	Preschool Assistant			
🗆 Kids' Zone Assistant	□ Animal Shelter (must be 18	years old; does not qualify	as a Family Program)			
Other/Community Service						
*YOUTH SPORTS COACHES: Which sport do you want to coach?						

□ I want to (circle one): a) coach; or b) assist any team.

□ I want to (circle one): a) coach; or b) assist my child's team. Child's Name /Division: ____

<u>NOTE</u>: ALL VOLUNTEERS WORKING WITH CHILDREN AND/OR IN SPECIFIED PROGRAMS ARE REQUIRED TO BE FIN-GERPRINTED AND CLEARED EVERY SIX MONTHS IN ACCORDANCE WITH THE CITY OF MANTECA PERSONNEL DEPART-MENT. CONTACT THE PARKS AND RECREATION OFFICE FOR FINGERPRINTING TIMES.

Today's Date:			
Name:			
Last	First	Middle	
Address:			
Street	City	State Zip	
Home phone: Work/C	Cell phone: E-ma	il:	
Are you currently employed? Yes I	No If yes, may we contact your p	oresent employer? 🗆 Yes 🛛 No	
Company Name:Su	upervisor:	_Phone:	
Do you have transportation?	No Driver's License #		
Has your driver's license ever been suspend	ded or revoked? 🛛 Yes 🗌 No		
If yes, please explain:			
Have you ever been convicted of a crime, other than parking tickets? Yes INO If yes, please provide details:			

How often a	ire you availabl	e to volunteer	? 🗆 Daily 🗆 '	Weekly 🗆 Mo	onthly 🗆 3 M	os. 🗆 6 Mos.	🗆 All Year
Are you inte	erested in volur	iteering on a te	emporary or per	manent basis?	🗆 Temporar	y 🗆 Perma	nent
Please indic	ate the day(s)	and times you	are available:				
	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
From:	AM PM	AM PM	AM PM	AM PM	AM PM	AM PM	AM PM
To:	AM PM	AM PM	AM PM	AM PM	AM PM	AM PM	AM PM
List any spe	cial skills, talen	ts or hobbies th	hat may help yo	u as a voluntee	r with MPRD:		
			iat may neip yo				
STUDENTS:	Are you receiv	ing school cred	its for voluntee	ring? 🗆 \	′es □No		
If yos place	o ovalaja:						
ij yes, pieus	e explain:						
Please list t	wo personal re	ferences:					
1							
1	Name			Phone		Relationship	
2							
	Name			Phone		Relationship	
Thank you for your interest in being a CAMPRS volunteer with MPRD. Volunteering does not qualify you for paid employment with the City of Manteca Parks and Recreation.							
I agree that the information in this application is true.							
Applicant si	gnature					Date	
Parent signa	ture					Date	
2		Required if a	pplicant is under 18	8 years of age			

LIABILITY WAIVER

In consideration of the acceptance of my application for entry into the above event, I hereby waive, release and discharge any and all claims for damages for death, personal injury or property damage which I may have, or which hereafter accrue to me, against the City of Manteca as a result of my participation. This release is intended to discharge the City of Manteca, its agents and employees, and any other involved municipalities or public entities from and against any and all liability arising out of or connected in any way with my participation in the event, even though that liability may arise out of the negligence or carelessness on the part of persons or entities mentioned above. I further understand that accidents and injuries can arise out of my participation. Knowing the risks, nevertheless, I hereby agree to assume those risks and to release and to hold harmless all of the persons or entities mentioned who (through negligence of carelessness) might otherwise be liable to me (or my heirs of assigns) for damages. It is further understood and agreed that this waiver, release and assumption of risk is to be binding on my heirs and assigns. THE UNDERSIGNED ACKNOWLEDGES THAT THEY HAVE READ AND UNDERSTAND THE PURPOSES AND EFFECT OF THIS DOCUMENT.

Applicant signature _		Date	
Parent signature		Date	
<u> </u>	Required if applicant is under 18 years of age		