Bett Way Play	То	Parks and Recre	Apple Valley ation Department ach Application	Parks Make Life Better!			
Sport:	BASKETBALL	VOLLEYBALL	Season/Year:				
League Desired: 3-4 (Pee Wee); 5-6 (Hot Shot); 2 nd ; 3-4 th ; 5-6 th ; 7-8 th ; High School; Boys/Girls							
Name:				Date:			
Name of	child(ren):						
Address:							
	Street		City	Zip Code			
Daytime Phone:			Evening Phone:				
E-Mail Ac	ddress:						
Please list any experience you have with coaching desired sport(s):							
Please list any additional volunteer experience:							

The Town believes the safety of participants in its programming is paramount. Therefore the Town requires that all employees, officials, and volunteer coaches undergo a Livescan background check. The following guidelines are used when considering an application; please review and initial your acknowledgment.

Recommended Criteria for Exclusion

A person will be disqualified and prohibited from serving as a volunteer if the person has been found guilty of the following crimes:

<u>Sex Offenses</u>

• All Sex Offenses – Regardless of the amount of time since offense.

Examples include: child molestation, rape, sexual assault, sexual battery, sodomy, prostitution, solicitation, indecent exposure, etc.

<u>Felonies</u>

• All Felony Violence – Regardless of the amount of time since offense.

Examples include: murder, manslaughter, aggravated assault, kidnapping, robbery, aggravated Burglary, etc.

- All Felony offenses other than violence or sex within the past 10 years.
- **Examples include:** drug offenses, theft, embezzlement, fraud, child endangerment, etc.

Misdemeanors

• All misdemeanor violence offenses within the past 7 years

Examples include: simple assault, battery, domestic violence, hit & run, etc.

• All misdemeanor drug & alcohol offenses within the past 5 years or multiple offenses in the past 10 years.

Examples include: driving under the influence, simple drug possession, drunk and disorderly, public intoxication, possession of drug paraphernalia, etc.

• **Any other misdemeanor** within the past 5 years that would be considered a potential danger to children or is directly related to the functions of that volunteer.

Example include: contributing to the delinquency of a minor, providing alcohol to a minor, theft – if person is handling monies, etc.

INITIAL

Pursuant to Penal Code Section 11105.3 the Town of Apple Valley fingerprints all individuals volunteering in youth programs. The Department of Justice supplies all information regarding criminal history to the Town. All information is kept confidential, except as provided by Penal Code Section 11105.3(4)(i). Applicants with certain convictions such as sex offenses are banned from serving as volunteers for the Town of Apple Valley Recreation Department.

Have you ever been convicted of a crime?	Yes	🗌 No	
(misdemeanor, felony, or military court martial).			

Do you currently have legal action pending against you? Yes No

If legal action is pending the Town will have to wait until the action is resolved through the court system before we can make a determination on a request to volunteer.

If "yes", please complete the information below. You may omit convictions resolved as a juvenile (age 17 or under) or a conviction sealed by a court order.

Dates_____ Charges_____ Sentences/Details______

I, the undersigned, understand the following:

I am aware that recreational activities can be hazardous and I am voluntarily participating in these activities with knowledge of the hazard involved and hereby agree to accept any and all risks of injury or death. The Town is not responsible for participant's injuries or damages occurring from "hazardous recreation activities" (CA Government Code 831.7). The Town does not provide participants with medical insurance or treatment for injuries. I agree to hold harmless and release the Town of Apple Valley, its officers, agents and employees from any and all liability arising from or related to my participation in Town of Apple Valley program activities. This release includes, but is not limited to, all liability for death, personal injury or property damage resulting from the active or passive negligence of the Town of Apple Valley or its agents or any defective or hazardous condition of any property or equipment owned, operated or maintained by the Town of Apple Valley. I am responsible for any loss, theft or damage to either personal or Town equipment, articles and/or facilities while using said equipment, articles and/or facilities.

Signature_____

Date_____