

Tamarac Teen Volunteer Application

Please fill out form with the information of the Volunteer.

Name _____ Date of Birth _____

Address _____

City _____ Zip _____

Phone _____ Email Address _____

High School _____ Grade _____

Past Work/Volunteer Experience _____

Do you have reliable transportation? YES NO Shirt Size _____

Parent Information

Name _____

Phone Number _____

Email _____

Emergency Contact

Name _____

Phone Number _____

Relationship to Volunteer (Circle One): Parent Neighbor Other (Please Indicate) _____

Waiver for Program Participation In consideration for the use of the City's parks and facilities, I do hereby indemnify and hold harmless the City of Tamarac, its officers, agents, staff, representatives, executors, and all others from any and all responsibilities or liabilities from injury or damages sustained resulting from my and/or my child's participation in any city sponsored activities and/or athletic league programs at the City of Tamarac. I hereby indemnify and hold harmless all aforementioned and any other acting upon their behalf from responsibility or liability for an injury or damage to myself and/or my child including any caused by negligent act or omission of any of those mentioned or others acting on their behalf or in any way arising out of or connected with my and/or my Child's participation in any activities at the City of Tamarac. I have carefully read this release in its entirety, fully understand the contents thereof and by execution below, expressly agree to be bound by its term and conditions.

Parent/Guardian Signature _____

Date _____

Tamarac Teen Volunteer Reference Sheet

Please provide three professional or personal character references. Please exclude family members.

Name _____ Phone _____

Email _____

Relationship to you _____

How long have you known them _____

Name _____ Phone _____

Email _____

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