

# Whole H.E.A.R.T. Foundation, Inc Class A Volunteer Registration Form ALL APPLICANTS MUST SHOW A <u>PHOTO ID</u> AT TIME OF REGISTRATION

Form must be filled out completely – incomplete forms will be returned. Please print legibly. Minimum age to

apply:	15.
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Part I – General Information	upp						
COUNTY VOLUNTEERING IN: Sc		School/Agency (if applicable):					
Male / Female Please circle answer Compared to the compare		Coach?Yes No Please circle answer					
Last Name (legal):		First Name (legal):			Middle Name:		
Home Address:							
City:		State:		Zip Code	2:		
Daytime Phone:		Eveni	ng Phone:				
Fax:	E-mail:						
Driver's License #: No learner's permits allowed.		Issuing State:			Check if you do not have a valid driver's license:		
Social Security #:			Date of B	irth:			
Emergency contact:		Emerg	gency Phone	e:			

Whole H.E.A.R.T. Foundation, Inc reserves the right to deny any applicant who does not provide the necessary data required (Social Security Number and Driver's License Number) to conduct a criminal background check and/or motor vehicle record check.

### **Part II – Background Information**

Questions 1-6 must be answered:

1. Have you ever been convicted of a criminal offense?	Yes	No			
2. Have you ever been criminally charged with neglect, abuse or assault?	Yes	No			
3. Have you ever been the subject of a court order involving sexual abuse or physical abuse of a minor, which restricts or did restrict contact with a minor or minors?	Yes	No			
4. Have you ever been adjudged liable for civil penalties or damages involving sexual or physical abuse?	Yes	No			
5. Has your driver's license ever been suspended or revoked in any state or other jurisdiction?	Yes	No			
6. Do you use illegal drugs?	Yes	No			
7. Have you ever applied to, volunteered or been employed by any Whole H.E.A.R.T. Foundation, Inc. organization?	Yes	No			
If you answered YES to questions 1 - 7 please explain (use additional sheets of paper if necessary):					
For Minors Only: Applicants must submit two (2) non-family references for consideration by SOFL. See Page 3 of form.					

## Whole H.E.A.R.T. Foundation, Inc RELEASE AND WAIVER OF LIABILITY, ACCEPTANCE OF TERMS

I certify that the information provided is true and complete to the best of my knowledge. I have not withheld any information that could affect my application unfavorably, if included. I understand that Whole H.E.A.R.T. Foundation, Inc may refuse to allow me to volunteer if I provided any incorrect information or omission.

The relationship between Whole H.E.A.R.T. Foundation, Inc and volunteers is an "at will" arrangement, and I understand that my volunteer service can be modified or terminated with or without notice or cause, at any time, at the option of Whole H.E.A.R.T. Foundation, Inc or at my option and that Whole H.E.A.R.T. Foundation, Inc may, in its sole discretion, decline to accept my application for volunteer with or without cause. I grant Whole H.E.A.R.T. Foundation, Inc permission to use my likeness, voice, and words in or on television, radio, print, film, and on Whole H.E.A.R.T. Foundation, Inc Website(s), or in any other form, format, or media, to promote Whole H.E.A.R.T. Foundation, Inc and its mission and to raise funds for Whole H.E.A.R.T. Foundation, Inc.

The information that I have provided may be verified, and I give ongoing permission to Whole H.E.A.R.T. Foundation, Inc to make periodic inquiry of others, including, but not limited to, a criminal background check to determine my suitability to act as a Whole H.E.A.R.T. Foundation, Inc.volunteer, per Whole H.E.A.R.T. Foundation, Inc Volunteer Screening Policy. If a Minor: I understand that upon turning 18 years of age, I will be subject to a criminal background check (and any subsequent screenings thereafter) per Whole H.E.A.R.T. Foundation, Inc. Volunteer Screening Policy.

I understand that I have the right to be trained and should receive instruction prior to volunteering. As part of my training, I will attend a Whole H.E.A.R.T. Foundation, Inc General Orientation Session. I will abide by all Whole H.E.A.R.T. Foundation, Inc's rules and policies.

I understand that in the course of volunteering for Whole H.E.A.R.T. Foundation, Inc. I may be privy to confidential/personal information (including, but not limited to, email addresses, phone numbers and contact information of mentees, parents and other volunteers) and I agree to keep said information in the strictest confidence. Furthermore, I will not use such information for purposes other than legitimate Whole H.E.A.R.T. Foundation, Inc. activities, nor will I use such information for or to the detriment of the individual or Whole H.E.A.R.T. Foundation, Inc.

I (and/or my minor child) release, indemnify, covenant not to sue, and hold harmless Whole H.E.A.R.T. Foundation, Inc., its administrators, directors, agents, officers, volunteers, employees, other participants, sponsors, advertisers, and if applicable, any owners and lessors of premises on which the activity takes place from all liability, any losses, claims (other than that of the medical accident benefit), demands, costs, or damages that I (and/or my minor child) may incur as a result of my participation and/or criminal background check and further agree that if, despite this 'Release and Waiver of Liability, Assumption of Risk, and Indemnity Agreement,' I, or anyone on my behalf, makes a claim against any of the Releases, I will indemnify, save, and hold harmless each of the Releases from any litigation expenses, attorney fees, loss, liability, damage or cost which may incur as a result of such claim.

## **VOLUNTEER CODE OF CONDUCT**

- I will respect the rights, dignity and worth of athletes, coaches, other volunteers, friends and spectators in Whole H.E.A.R.T. Foundation, Inc.
- I will treat everyone equally regardless of sex, ethnic origin, religion or ability.
- I will dress and act at all times in a manner which will be appropriate to my assigned responsibilities and a credit to myself, the athletes and Whole H.E.A.R.T. Foundation, Inc.
- I will display control, respect, dignity and professionalism to all involved including athletes, coaches, opponents, officials, administrators, parents, spectators and media. Profanity and taunting are subject to immediate ejection.
- I will provide for the general welfare, health, and safety of any Whole H.E.A.R.T. Foundation, Inc. in my charge during the course of my assigned duties.
- I will respect the property of hotels, dormitories, schools, athletic, recreational and dining facilities.
- I will report any emergencies to the appropriate authorities after first taking immediate action to ensure the health and safety of the participants.
- I will not take part in the consumption of alcoholic beverages and/or controlled substances during any Whole H.E.A.R.T. Foundation, Inc training or competition. Nor will I take part in smoking or chewing tobacco at any Whole H.E.A.R.T. Foundation, Inc training or competition site except in designated areas.
- I will not engage in any type of inappropriate behavior, sexual activity, and/or verbal or physical abuse with Whole H.E.A.R.T. Foundation, Inc, staff, officials or other volunteers.

The Code of Conduct is designed to assist each volunteer in abiding by the philosophy of Whole H.E.A.R.T. Foundation, Inc. and its mission. Any volunteer who does not follow this Code of Conduct can be prohibited from participation in this event. By signing this form and showing my photo identification I acknowledge that I have read the Volunteer Code of Conduct and all releases and notifications and agree to adhere to said terms.

#### Volunteer's Signature:

Date:

**Signature of Parent or Guardian if Volunteer is a Minor – under 18** (form has been explained to minor by parent/guardian):

Date:

#### Print Full Name of Parent or Guardian:

Please fill out all pages of this form and submit to your local county program. Program Info: <a href="http://www.wholeheartfdn.org">www.wholeheartfdn.org</a>

For Office Use Only:	I performed a photo ID	□ No	valid auto insurance shown? □ Yes			□ No			
Minors have provide Yes □ No	ed requisite two (2) references:	Shirt size:	S	М	L	XL	XXL	XXXL	
Signature of Staff or	r Board Member:						Date:		