

Volunteer Application

Return completed application to:

Delaney Harty, Volunteer Coordinator, at dharty@olparks.com

deliver to: 9401 S. Oak Park Ave., Oak Lawn, IL. 60453

Date: //	
Volunteer information	any/Group (if applicable):
	Birth Date:
	City: State: Zip:
Home Phone: Cell	
Relationship:	Cell Phone:
Have you ever been convicted of a sexual offe	nse? 🗌 Yes 🔲 No
Areas of Interest: (Please check all that ap	oply)
Special Events (age 12+)	Special Recreation (age 16+)
Dog'gone Easter Egg Hunt (April)	Mardi Gras Mambo (February)
Earth Day (April)	Halloween Hip-Hop (October)
Easter Egg Hunt (April)	☐ Guys & Gals (Weekly)
☐ Home Run Derby (April)	Special Recreation Sports (Weekly)
Stony Creek Clean-Up (May)	Athletics (age 12+)
☐ Fourth of July (July)	-
Monarch Festival (September)	☐ Home Run Derby (April)
Spookview (October)	☐ Volleyball for Charity (April)
Candy Cane Hunt (December)	Turkey Shoot (November)
☐ Breakfast with Santa (December)	Theatre (age 16+)
Agreement:	☐ Ushers
	Selling Concessions
patrons, and the community and as such, that I will be entitle applicable to the employees of the Oak Lawn Park District. It Park District and that they will provide me with necessary inf	s and are intended as a contribution by me for public service for the District, its ed to no compensation or any fringe benefits or other employment rights t is expressly understood that I am not an employee or agent of the Oak Lawn formation and guidance to perform my volunteer services. I authorize the Oak from the Illinois Sex Offender Registration. For any reason whatsoever, either
the Oak Lawn Park District website, as well as the supervision recognize and acknowledge that there are certain risks of phassume the full risk of any and all injuries, damages or loss, said participation. I further agree to waive and relinquish all of	the rules of conduct laid out in the Volunteer Manual, made available to me on on staff and employees of the department in performing my services. I nysical injury to volunteers in this program/activity, and I voluntarily agree to regardless of severity, that my minor child/ward or I may sustain as a result of claims I or my minor child/ward may have (or accrue to me or my child/ward) e District, including its officials, agents, employees, and other volunteers. I he best of my knowledge and have been given voluntarily.
Volunteer Signature	Date Signed
Parent/Guardian Signature (if volunteer is under 18)	 Date Signed

Please Complete for Volunteers Age 18+

CONVICTION INFORMATION NAME CHECK REQUEST

Administration Office Of	пу		
□ Sex Offender Check on (Check on line) X Volunteer	Date se and indicate your su	lnitials pervisor on the	
□ Employee		_	
Subjects Last Name	First Name	Middle Name	
Subjects Maiden Name	Date of Birth	Sex Race	
70			
Street Address		City/State/Zip Code	
fields. These fields include sex codes "u•" for Unknown. He standard code	and race codes. The standard co values for race codes include "W Alaskan Native, or "U" for Unkn	valid national crime information center code values for certa ode values for sex codes include 'M" for Male, ""F" for Fema F for White (includes Mexicans and Latins), "B" for Black, iown. If your submission contains values other than the standard contains values of the standard contain	ale, or ·'A" for
Have you ever been convicted	of any felony? YES	NO	
Have you ever been convicted or any criminal drug statute?	of a misdemeanor involving YESN	dishonesty, criminal sexual conduct, assault or ba	attery,
employment, and shall perfonn a crin applied. Applicants are 1101 obligated subsection (C) of said statute shall au	ninal backgro,md check for applicate to disclose sealed or expunged retornatically disqualify the applications.	criminal conviction information concerning applicants offere cants for all positions, including the position for which you leacords of convictions. Conviction of offenses enumerated in nt from consideration for working for the district. All other deration, but rather, the conviction will be considered in relationship.	have
If yes, describe: (Continue on b	ack)		
Signature:		Date:	