



3231 Main Street  
Oakley CA 94561  
925 625 7000 main  
925 625 7041 rec  
925 625 9859 fax  
[www.oakleyinfo.com](http://www.oakleyinfo.com)

Dear Volunteer,

Thank you for your interest to assist the City of Oakley in building a better community.

Please take a moment to complete our volunteer application and waiver. All information will be kept strictly confidential. We have several volunteer opportunities available throughout the year and would be pleased to have your assistance. We will do our best to place you in a program or event that best utilizes your interest and experience, however we cannot guarantee placement. If the opportunity for you to volunteer becomes available we will contact you. Your application will be kept on file for one calendar year.

If you have any questions, please contact our office at 925.625.7041. Thank you again for your interest in the City of Oakley.



## VOLUNTEER APPLICATION

### SECTION ONE: GENERAL INFORMATION

Date Submitted: \_\_\_\_\_ Position of Interest: \_\_\_\_\_  
First & Last Name: \_\_\_\_\_  
Day Phone Contact: \_\_\_\_\_ Alternate Phone Contact: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
E-mail Address: \_\_\_\_\_  
Gender:  Male  Female

### SECTION TWO: STUDENT INFORMATION

Parent/Guardian: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Name of School: \_\_\_\_\_ Grade: \_\_\_\_\_  
Teacher: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

### SECTION THREE: EXPERIENCE

California Drivers License Number: \_\_\_\_\_  
Present Employer: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Contact Number: \_\_\_\_\_  
What experience would you bring to this program? \_\_\_\_\_

Why are you seeking this opportunity? \_\_\_\_\_

### SECTION FOUR: AVAILABILITY & INTEREST

When are you available?

<input type="checkbox"/> Sunday	<input type="checkbox"/> Monday	<input type="checkbox"/> Morning 6am - 11am	<input type="checkbox"/> Afternoon 11 am - 3pm	<input type="checkbox"/> Evening 3pm - 7pm	<input type="checkbox"/> Night 7pm - 11pm
<input type="checkbox"/> Tuesday	<input type="checkbox"/> Wednesday	Start Date: _____ Finish Date: _____			
<input type="checkbox"/> Thursday	<input type="checkbox"/> Friday	Area of Interest: (Special Events, Outdoors, Landscaping, etc)			
<input type="checkbox"/> Saturday		_____			

Why would you like to volunteer? \_\_\_\_\_

### SECTION FIVE: LIABILITY WAIVER & EMERGENCY CONTACTS

Emergency Contact Name: \_\_\_\_\_  
Relationship: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
Emergency Contact Name: \_\_\_\_\_  
Relationship: \_\_\_\_\_ Phone Number: \_\_\_\_\_



As the parent/guardian of a minor or participating person that is participating in the City of Oakley's Volunteer Program, I recognize and acknowledge that there are certain risks of physical injury. This Waiver, Release and Indemnity Agreement is intended to discharge in advance the City of Oakley, the Liberty Union High School District, the Oakley Union Elementary School District its officers, employees, volunteers, and agents from any and all liability arising out of or connected in any way with my child/ward's participation in said activity, even though that liability may arise out of negligence or carelessness on the part of the persons or entities mentioned above. It is further agreed that this Waiver, Release and Indemnity Agreement is to be binding on my heirs and assignees. I agree to assume the full risk of any injuries, damages or loss that my minor child/ward may sustain as a result of participating in any and all activities connected with or associated with these activities. Parent/Guardian additionally agrees to indemnify the City against any claims or rights of action for damages which the minor(s) has/have before or after they reach age of majority. In the event of any emergency, I authorize City Officials to secure from any licensed hospital, physician, and/or medical personnel any treatment deemed necessary for my minor child's immediate care and agree that I will be responsible for payment of any and all medical services rendered.

- I agree to all of the above conditions, and
- I agree to abide by all instructions set forth by the City of Oakley staff during my participation in this program
- I understand that I am required to wear and/or use all safety equipment designated by the City of Oakley Staff.
- *I understand that I am subject to dismissal from participation of said activity for inappropriate and disrespectful behavior.*
- I have read and fully understand the above Waiver, Release and Indemnity Agreement and Permission to Secure Treatment.
- I have also read & signed the Program Behavior contract and understand that I will be treated fairly with out discrimination.
- Each participant must have his or her own individual registration & waiver form!

Participant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

\* Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

THIS



**THE SECTION BELOW IS ONLY REQUIRED FOR VOLUNTEERS 18 AND OLDER**

The City of Oakley is prohibited from hiring a person for employment at, or hiring a volunteer to perform services at, any of its parks, playgrounds or recreational centers used for recreational purposes in a position having supervisory or disciplinary authority over any minor or if the person has been convicted of certain crimes under the California Public Resources Code Section 5164. Section 5164 also authorizes the City of Oakley to screen any such prospective employee or volunteer for his or her criminal background. In light of your interested in being hired as a volunteer to perform services at, any of its parks, playgrounds or recreational centers used for recreational purposes, in a position having supervisory or disciplinary authority over any minor, and in order to give effect to Section 5164 of the Public Resources Code of the State of California, please answer the following supplemental questionnaire:

1. Have you ever been convicted of any crime?  Yes  No  
If your answer is yes, please describe the crime for which you were convicted, the date upon which you were convicted and the jurisdiction in which you were convicted:

---

---

---

2. Without in any way limiting the foregoing, have you ever been convicted of any crime involving an assault with intent to commit a felony, any crime against a person involving sexual assault, any crime against public decency and good morals, disorderly conduct, annoying or molesting a child under the age of 18, kidnapping robbery or carjacking?  Yes  No

If your answered is yes, please describe the crime for which you were convicted, the date upon which you were convicted and the jurisdiction in which you were convicted:

---

---

---

3. Are you currently released on bail or on your own recognizance for any crime?  Yes  No  
If your answer is yes, please describe the crime for which you were convicted, the date upon which you were convicted and the jurisdiction in which you were convicted:

---

---

---

4. Are you willing to be fingerprinted in order for The City of Oakley to screen you for any criminal background?  Yes  No



**DECLARATION**

I, \_\_\_\_\_, in seeking to be hired by The City of Oakley as a volunteer to perform services, at any park, playground or recreational center used by City of Oakley for recreational purposes, in a position having supervisory or disciplinary authority over any minor, hereby declare under penalty of perjury that the forgoing is true and correct and that this declaration is executed in Oakley, California on \_\_\_\_\_, 20 \_\_\_\_\_. I acknowledge and agree that should any answers to the foregoing questions be subsequently determined to be false and not true, The City of Oakley can immediately terminate my employment by it or ceasing allowing me to perform voluntary services, without notice.

I hereby agree to indemnify and hold harmless The City of Oakley from any and all claims, causes of action, suits, actions, damages, losses or liability arising out of termination of my volunteer services rendered to The City of Oakley which my occur should any of my answers to the foregoing questions be subsequently determined to be false and or untrue.

\_\_\_\_\_  
Volunteer Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
City Staff Signature

\_\_\_\_\_  
Date