National Trail Parks and Recreation District
Volunteer Application Form

Application Date

Name
First    Middle    Last

Address
Street      City   State  Zip

Phone
Primary       Secondary

Email

Date of Birth

NOTE: Prior to selection for volunteer assignment, you will be required to provide your social security and driver’s license information so a background check can be completed.

Have you ever been convicted of a felony?  NO   YES

Is this court-ordered community service?  NO   YES   (If YES, Please Attach Applicable Documentation)

Is volunteerism a school or organizational requirement?  NO   YES   If YES, School / Organization Name

Will NTPRD need to complete any paperwork?  NO   YES   (If YES, Please Attach Applicable Forms)

Please indicate below the type of volunteer work you are interested in (check all that apply):

Adult Programs    Nature Programs    Natural Resource / Conservation    Special Events
Children Programs    Park Clean-Up    Youth Coach    Child’s Name
Fitness Programs    Office Volunteer    Other    Your Shirt Size

How did you hear about our volunteer program?

Any special training, skills, or certifications that would be helpful to NTPRD?

What are your interests, hobbies, and/or talents?

Please check the time of day you are usually available to volunteer.

Weekday Mornings    Weekday Afternoons    Weekday Evenings    Weekends
References:
(1) ___________________________  ___________________________
Name                                           Occupation
______________________________  ___________________________
Phone Number                                           Email Address
(2) ___________________________  ___________________________
Name                                           Occupation
______________________________  ___________________________
Phone Number                                           Email Address

Emergency Contact Information:
(1) ___________________________  ___________________________
Name                                           Relationship
______________________________  ___________________________
Primary Phone                                           Secondary Phone

Answers to application questions will be utilized for applicable volunteer job related information only and will not be released to any other organization or volunteers without your consent.

Release:
I certify that the statements contained herein are true to the best of my knowledge. I understand that falsification of any answers or failure to answer any question contained herein is cause for dismissal from volunteering with National Trail Parks and Recreation District. NTPRD has the right to refuse volunteer service at their discretion.

I understand and agree that NTPRD may make a thorough investigation of my past and current employment and activities (including but not limited to motor vehicle operator and police record investigation) and I release from liability or responsibility all persons or organizations supplying such information. All information is subject to verification.

I agree to abide by the rules and regulations of National Trail Parks and Recreation District. I do hereby grant NTPRD and City of Springfield permission to publish in print, electronic or video format the likeness or image of myself while performing volunteer duties.

I acknowledge that I am volunteering to assist National Trail Parks and Recreation District and understand that as a volunteer I will not be compensated for my donated services. I am not eligible for any workers’ compensation benefits and I am not covered by any medical insurance in the event that I become injured while volunteering and that National Trail Parks and Recreation District cannot be held liable. I, the undersigned, hereby assume all risks and hazards incidental to the conduct of activities and transportation to and from designated locations while volunteering.

In consideration of your accepting my entry, I hereby release, indemnify, and hold harmless National Trail Parks and Recreation District and its Board, the City of Springfield and its Commissioners, and the Board of Clark County Commissioners from any and all liability claims, actions, demands and judgments arising out of injury or loss sustained by me while participating in activities or using facilities of the National Trail Parks and Recreation District or the City of Springfield.

________________________________________  ________________
Signature of Volunteer Applicant                                           Today’s Date

NTPRD   ●   1301 Mitchell Blvd.   ●   Springfield, OH  45503
Phone:  937-328-PARK (7275)   ●   Fax:  937-328-3966   ●   Website:  ntprd.org

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