

VOLUNTEER

The Best Things in Life are Free!

As a volunteer, you are joining the Orange County Parks and Recreation Division at a very exciting time! We have over 100 beautiful parks with amenities that appeal to guests of all ages. Orange County Parks and Recreation encourages individuals, companies, civic groups and neighborhood associations to volunteer their time at the park of their choice. Rewarding experiences and great friends are made while beautifying parks, maintaining natural areas or working with youth in one of our exciting sports programs and helping in our senior programs.

Benefits of Volunteering

Volunteers share talents and gifts to the community through important programs.

Volunteers receive special training, identification and recognition for their contributions to the community.

Volunteers improve the quality of life in your community and beautify your local parks.

Volunteer coaches (only) receive a T-shirt and a \$25 credit to be used for a 90-day fitness-center membership or toward a program fee.

How to Volunteer

First complete the *Volunteer Application* and the *Background Investigation Disclosure and Authorization* form included in this packet. *The Background Investigation Disclosure and Authorization* form *is not required for group or special event volunteers*. Turn in these forms directly to the park site where you wish to volunteer. Volunteer applications shall not be processed without approval from the park site. Once the application has been processed and the background screening cleared, staff shall contact you to let you know when you can start your volunteer hours.

Volunteer coaches will be issued a T-shirt, which must be worn at all times when volunteering.

Continuous service volunteers may be provided with a volunteer T-shirt to be worn while volunteering.

Minimum age for unchaperoned volunteers is 16. Should a child under the age of 16 like to volunteer for any Parks & Recreation's programs, they must be accompanied by their parent or legal guardian at all times during their volunteer work.

Minimum age for coaching positions is 18. Management approval shall be based on the perceived maturity level and ability to operate under high-stress environments.



Volunteer Application



Name of applie	cant:						
		First Name		Full Middle		Last Name	
Contact Info	rmation						
Address			City			State	ZIP
Primary Phone				Secondary Phone		l	
Email							
Emergency Conta	ct						
Name				Phone			
Education/S	kills						
Select your highest level of				0)/ (0			
High Schoo Select all that apply:	l or GED	Some Col	iege	2 Years of College	4 or	more years	of College
Microsoft Wo	ord Exce	I PowerF	Point 🔲 Te	ams 🔲 Typin	g: WPM		
CPR [First Aid	Child Dev	velopment Ass	ociation			
Language(s)	you speak oth	her than Englisl	h:				
Please list any rele	evant volunteer o	or work experience	е				
Availability							
Date you can star	rt	Nι	umber of hours p	er day			
Time of day you a	re available for th	ie days you are av	vailable (if not ava	ilable leave blank)			
Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	1	Saturday
Volunteer Po	sitions cho	oose one of th	e following				
_		t with campgrou		Scorekeene	r/Scoreboard	Operator: V	outh and/or
		t maintenance a			game record k		
		contact for after					ing score, team
	mper emergen		21 110 0110 01110		ual fouls, time		
_		event/group pro	oioot vicite at	lineups and		,	,
our park site		eveningloup pro	ojeci visits at	☐ Teen Volunt	eer: Teens 16	vears or old	er can volunteer
Instructor: Lead classes or other activities at our			Teen Volunteer: Teens 16 years or older can volunteer in a variety of ways. Teens under the age of 16 must				
		or other activitie	s at our	be accompanied by a parent/legal guardian during			
various sites.			their entire volunteer time. These volunteers need				
Name of clas	ss or activity			managemen	t approval.		
				☐ Youth Sport	s Coach: Orga		
Special Eve	nto Voluntoor				e program for	the assigned	d sport working
		· Acciet staff with	th ich duties	aspects of th			
ioi ovoin doi		: Assist staff wit	th job duties	with staff to p	provide a qualit	ty program a	and encourage
	ivities. (Single		th job duties	with staff to p student athle	provide a qualitetes and paren	ty program a	
			th job duties	with staff to p student athle	provide a qualit	ty program a	and encourage
Coachas On	ivities. (Single		th job duties	with staff to p student athle	provide a qualitetes and paren	ty program a	and encourage
Coaches On	ivities. (Single		th job duties	with staff to p student athle	provide a qualities and parent ortsmanship.	ty program a	and encourage nletic excellence
Coaches On	ivities. (Single		th job duties	with staff to p student athle	provide a qualities and parent ortsmanship.	ty program a	and encourage



Applicant Signature

Volunteer Application



			•				
List Three References (may be from current or pre	vious jobs)	Phone					
		Trione		1			
Address	City		State	ZIP			
Name		Phone					
Address	City		State	ZIP			
Name		Phone		1			
Address	City		State	ZIP			
			,L	1			
Volunteer Agreement							
As as a volunteer at Orange County Parks and Recreation	on						
I shall notify a supervisor or staff when I can no longer	volunteer or canno	ot report as scheduled.					
I shall arrive on time and meet commitments, because	someone is counti	ng on me!					
I shall be courteous to staff, members of the public, and other volunteers.							
I shall attend mandatory meetings for youth sports programs.							
I shall attend training sessions offered by Parks and Recreation.							
I shall if coaching, remain with the team for the duration of the season.							
I shall if applicable, turn in equipment at the end of the season.							
I shall be reliable in fulfilling my part of any work agreement.							
I shall seek and accept the guidance and support needed to complete assignments.							
I shall present a positive public image that speaks well of the park or facility and the Parks and Recreation Division.							
I shall abide by Orange County's non-smoking guideline. (Administrative regulations executive order #10.001)							
I shall actively participate as a team member with others on the staff.							
I shall abide by the basic operational and safety rules that exist at the park or facility.							
I shall immediately report all accident or personal safety incidents to the assigned staff or supervisor.							
I shall wear appropriate safety protection gear.							
I understand that I may be working outdoors where I may experience heat and nature's creatures.							
Applicant Name (First, Full Middle, Last)							

Today's Date



Registration Card



Primary Parent/Guardian Information For organizations loave the first name, gender and pithidate fields blank Primary Parent/Guardian Information						Offic	ce Use Only:	Additional Forms Yes No
Primary Parent/Guardian Information For organizations loave the first name gender and birthdate fields blank Primary Parent/Guardian Information	Program Participant (first name)	(last name)		Date	e of Birth		Age	Male Female
Primary Parent/Guardian Information For organizations loave the first name, gendor and birthdate fields blank First hare Primary Parent State	ark Site Program Name		Pro	Program Start Date		Progra	Program End Date	
Last Name (or Organizations leaves the first name, gender and birthdate fields blank	School Attending						Grade	9
Last Name (or Organizations leaves the first name, gender and birthdate fields blank		Prima	ry Parent/Gu	ardian In	forma	ation		
Site Country Site Country No Yes Pleasiderin Proce Type (Cell, Work, Horne etc.)	Last Name (or Organization Name)	For organizations	leave the first nam	e, gender ar	nd birtho	late fields blank	(
Site Country Site Country No Yes Pleasiderin Proce Type (Cell, Work, Horne etc.)	Ctract Address			Ant/Cuita/Llnit/DI	Ida			I
Estimatify Phone Estimatify Phone Estimatify Phone Type (Cell, Work, Horre etc.)	Sileer Address			Apt/Suite/Unit/Biag.				
Secondary Phone Secondary Phone Secondary P	City/Township/Territory			State ZIP			Country	
Cuestodial Parentil Legal Guardian Relationship to Participant	Primary Phone				E	Ext/Intn'l #		Phone Type (Cell, Work, Home etc.)
Custodial Parent Legal Guardian Emergency Contact Information Relationship Work Phone Mobile Phone Mobile Phone NOTICE TO THE MINOR CHILD'S NATURAL GUARDIAN READ THIS FORM COMPLETELY AND CAREFULLY. YOU ARE AGREEING TO LET YOUR MINOR CHILD ENGAGE IN A POTENTIALLY DANGEROUS ACTIVITY. YOU ARE AGREEING TO LET YOUR MINOR CHILD ENGAGE IN A POTENTIALLY DANGEROUS ACTIVITY. YOU ARE AGREEING THAT, EVEN IF ORANGE COUNTY USES REASONABLE CARE IN PROVIDING THIS ACTIVITY, THERE IS A CHANCE YOUR CHILD MAY BE SERIOUSLY INJURED OR KILLED BY PARTICIPATING IN THIS ACTIVITY BECAUSE THERE ARE CERTAIN DANGERS INHERENT IN THE ACTIVITY WHICH CANNOT BE AVOIDED OR ELIMINATED. BY SIGNING THIS FORM YOU ARE GIVING UP YOUR CHILD'S RIGHT AND YOUR RIGHT TO RECOVER FROM ORANGE COUNTY IN A LAWSUIT FOR ANY PERSONAL INJURY, INCLUDING DEATH, TO YOUR CHILD DR ANY POPERTY DAMAGE THAT RESULTS FROM THE RISKS THAT ARE A NATURAL PART OF THE ACTIVITY. YOU HAVE THE RIGHT TO REFUSE TO SIGN THIS FORM, AND ORANGE COUNTY HAS THE RIGHT TO REFUSE TO LET YOUR CHILD PARTICIPATE If you DO NOT SIGN THIS FORM. PARTICIPANT CONSENT RELEASE I (or my child/children) am voluntarily participating in this program, class or event written above. In return for the opportunity to participate, I voluntarily for myself (or my child/children) am valuntary participating in this program, class or event written above. In return for the opportunity to participate, I voluntarily for myself (or my child/children) am voluntarily participating in this program, class or event written above. In return for the opportunity to participate, I voluntarily for myself (or my child/children) am voluntarily participating in this program, class or event. Should this registration be for one of my minor children, I hereby consent to emergency treatment and transportation of my minor child for any condition with participation in this program, class or event. Further, I hereby give permission to Orange County to use any photographs shall be the property of Orange County and it an ortentia	Secondary Phone			Ext/Intn'l #			Phone Type (Cell, Work, Home etc.)	
Emergency Contact Information Custodial Perent/Legal Guardian Relationship Work Phone Mobile Phone Mobile Phone NOTICE TO THE MINOR CHILD'S NATURAL GUARDIAN READ THIS FORM COMPLETELY AND CAREFULLY. YOU ARE AGREEING TO LET YOUR MINOR CHILD ENGAGE IN A POTENTIALLY DANGEROUS ACTIVITY. YOU ARE AGREEING THAT, EVEN IF ORANGE COUNTY USES REASONABLE CARE IN PROVIDING THIS ACTIVITY, THERE IS A CHANCE YOUR CHILD MAY BE SERIOUSLY INJURED OR KILLED BY PARTICIPATING IN THIS ACTIVITY, THERE IS A CHANCE YOUR CHILD MAY BE SERIOUSLY INJURED OR KILLED BY PARTICIPATING IN THIS ACTIVITY BECAUSE THERE ARE CERTAIN DANGERS INHERENT IN THE ACTIVITY WHICH CANNOT BE AVOIDED OR ELIMINATED. BY SIGNING THIS FORM YOU ARE GIVING UP YOUR CHILD'S RIGHT AND YOUR RIGHT TO RECOVER FROM ORANGE COUNTY IN A LAWSUIT FOR ANY PERSONAL INJURY, INCLUDING DEATH, TO YOUR CHILD OR ANY PROPERTY DAMAGE THAT RESULTS FROM THE RISKS THAT ARE A NATURAL PART OF THE ACTIVITY. YOU HAVE THE RIGHT TO REFUSE TO SIGN THIS FORM, AND ORANGE COUNTY HAS THE RIGHT TO REFUSE TO LET YOUR CHILD PARTICIPATE If or my child/children) am voluntarily participating in this program, class or event written above. In return for the opportunity to participate, I voluntarily for myself (or my child/children) waive, release, indemnify and hold harmless Orange County and its officers and employees from any liabilities, claims, damages, injuries, losses and expenses including reasonable attorneys fees and cost whatsoever, including those for personal injury, death or property damage, which may arise from or in connection with participation in this program, class or event to emergency treatment or transportation. Should this registration be for one of my minor children, I hereby consent to emergency treatment or transportation of my minor child for any condition which may arise during, from or in connection with participation in this program, class or event the property of Orange County and I am not entitled to compensation of any kind for the use of such photographs. I agree to a	Email				(Gender		Birthdate
Emergency Contact Information Custodial Parent/Legal Guardian Relationship Work Phone Mobile Phone Mobile Phone Mobile Phone Mobile Phone Mobile Phone NOTICE TO THE MINOR CHILD'S NATURAL GUARDIAN READ THIS FORM COMPLETELY AND CAREFULLY. YOU ARE AGREEING TO LET YOUR MINOR CHILD ENGAGE IN A POTENTIALLY DANGEROUS ACTIVITY. YOU ARE AGREEING THAT, EVEN IF ORANGE COUNTY USES REASONABLE CARE IN PROVIDING THIS ACTIVITY, THERE IS A CHANCE YOUR CHILD MAY BE SERIOUSLY INJURED OR KILLED BY PARTICIPATING IN THIS ACTIVITY BECAUSE THERE ARE CERTAIN DANGERS INHERENT IN THE ACTIVITY WHICH CANNOT BE AVOIDED OR ELIMINATED. BY SIGNING THIS FORM YOU ARE GIVING UP YOUR CHILD'S RIGHT AND YOUR RIGHT TO RECOVER FROM ORANGE COUNTY IN A LAWSUIT FOR ANY PERSONAL INJURY, INCLUDING DEATH, TO YOUR CHILD OR ANY PROPERTY DAMAGE THAT RESULTS FROM THE RISKS THAT ARE A NATURAL PART OF THE ACTIVITY, YOU HAVE THE RIGHT TO REFUSE TO SIGN THIS FORM, AND ORANGE COUNTY HAS THE RIGHT TO REFUSE TO LET YOUR CHILD PARTICIPATE IF YOU DO NOT SIGN THIS FORM. PARTICIPANT CONSENT RELEASE I (or my child/children) am voluntarily participating in this program, class or event written above. In return for the opportunity to participate, I voluntarily for myself (or my child/children) am valve, release, indemnify and hold harmless Orange County and its officers and employees from any liabilities, claims, damages, injuries, losses and expenses including reasonable attorneys less and cost whatsoeyer, including those for personal injury, death or property damage, which may arise from with participation in this program, class or event and I shall be responsible for the payment of all costs associated with such emergency treatment or treatment or treitled to compansation of any with for the use of such photographs. I large such photographs shall be the property of Orange County and I am not entitled to compansation of any thin for the use of such photographs. Jagee to abide by all county ordinances and Parks and Recreation rules and regulations, and understan	OCPCC Employee?	ationship to Participant						
Relationship Work Phone Mobile Phone Emergency Contact Name Relationship Work Phone Mobile Phone Relationship Work Phone Mobile Phone NOTICE TO THE MINOR CHILD'S NATURAL GUARDIAN READ THIS FORM COMPLETELY AND CAREFULLY. YOU ARE AGREEING TO LET YOUR MINOR CHILD ENGAGE IN A POTENTIALLY DANGEROUS ACTIVITY. YOU ARE AGREEING THAT, EVEN IF ORANGE COUNTY USES REASONABLE CARE IN PROVIDING THIS ACTIVITY, THERE IS A CHANCE YOUR CHILD MAY BE SERIOUSLY INJURED OR KILLED BY PARTICIPATING IN THIS ACTIVITY BECAUSE THERE ARE CERTAIN DANGERS INHERENT IN THE ACTIVITY WHICH CANNOT BE AVOIDED OR ELIMINATED. BY SIGNING THIS FORM YOU ARE GIVING UP YOUR CHILD'S RIGHT AND YOUR RIGHT TO RECOVER FROM ORANGE COUNTY IN A LAWSUIT FOR ANY PERSONAL INJURY, INCLUDING DEATH, TO YOUR CHILD OR ANY PROPERTY DAMAGE THAT RESULTS FROM THE RISKS THAT ARE A NATURAL PART OF THE ACTIVITY. YOU HAVE THE RIGHT TO REFUSE TO SIGN THIS FORM, AND ORANGE COUNTY HAS THE RIGHT TO REFUSE TO LET YOUR CHILD PARTICIPATE IF YOU DO NOT SIGN THIS FORM. PARTICIPANT CONSENT RELEASE I (or my child/children) am voluntarily participating in this program, class or event written above. In return for the opportunity to participate, I voluntarily for myself (or my child/children) waive, release, indemnify and hold harmless Orange County and its officers and employees from any liabilities, claims, damages, injuries, losses and expenses including reasonable attorneys fees and cost whatsoever, including those for personal injury, death or property damage, which may arise from or in connection with participation in this program, class or event. Should this registration be for one of my minor children, I hereby consent to emergency treatment and transportation of my minor child for any condition which may arise form or in connection with participation in this program, class or event. Should this registration be for one of my minor children, I hereby consent to emergency treatment and transportation of any kind for the use of such photographs. I agree to abide by all county o	OCBCC Employee? No Yes	E ma	aveanay Can	taat Infa	um otic	212		
NOTICE TO THE MINOR CHILD'S NATURAL GUARDIAN READ THIS FORM COMPLETELY AND CAREFULLY. YOU ARE AGREEING TO LET YOUR MINOR CHILD ENGAGE IN A POTENTIALLY DANGEROUS ACTIVITY. YOU ARE AGREEING THAT, EVEN IF ORANGE COUNTY USES REASONABLE CARE IN PROVIDING THIS ACTIVITY, THERE IS A CHANCE YOUR CHILD MAY BE SERIOUSLY INJURED OR KILLED BY PARTICIPATING IN THIS ACTIVITY BECAUSE THERE ARE CERTAIN DANGERS WHERENT IN THE ACTIVITY WHICH CANNOT BE AVOIDED OR ELIMINATED. BY SIGNING THIS FORM YOU ARE GIVING UP YOUR CHILD'S RIGHT AND YOUR RIGHT TO RECOVER FROM ORANGE COUNTY IN A LAWSUIT FOR ANY PERSONAL INJURY, INCLUDING DEATH, TO YOUR CHILD OR ANY PROPERTY DAMAGE THAT RESULTS FROM THE RISKS THAT ARE A NATURAL PART OF THE ACTIVITY. YOU HAVE THE RIGHT TO REFUSE TO SIGN THIS FORM, AND ORANGE COUNTY HAS THE RIGHT TO REFUSE TO LET YOUR CHILD PARTICIPATE IF YOU DO NOT SIGN THIS FORM. PARTICIPANT CONSENT RELEASE I (or my, child/children) am voluntarily participating in this program, class or event written above. In return for the opportunity to participate, I voluntarily for myself (or my child/children) waive, release, indemnify and hold harmless Orange County and its officers and employees from any liabilities, claims, damages, injuries, losses and expenses including reasonable attorneys fees and cost whatsoever, including those for personal injury, death or property damage, which may arise from or in connection with participation in this program, class or event. Should this registration be for one of my minor children, I hereby consent to emergency treatment and transportation of my minor child for any condition which may arise from or in connection with participation in this program, class or event. I agree such photographs taken by the County, its officers, employees, or agents, of either me or my child/children during reasonable attorneys fees and requirements when necessary. This release shall remain in effect until canceled in writing. SIGNATURE REQUIRED OF ALL PARTICIPANTS DATE	Custodial Parent/Legal Guardian		,)II	Mobile	e Phone
READ THIS FORM COMPLETELY AND CAREFULLY. YOU ARE AGREEING TO LET YOUR MINOR CHILD ENGAGE IN A POTENTIALLY DANGEROUS ACTIVITY, YOU ARE AGREEING THAT, EVEN IF ORANGE COUNTY USES REASONABLE CARE IN PROVIDING THIS ACTIVITY, THERE IS A CHANCE YOUR CHILD MAY BE SERIOUSLY INJURED OR KILLED BY PARTICIPATING IN THIS ACTIVITY BECAUSE THERE ARE CERTAIN DANGERS INHERENT IN THE ACTIVITY WHICH CANNOT BE AVOIDED OR ELIMINATED. BY SIGNING THIS FORM YOU ARE GIVING UP YOUR CHILD'S RIGHT AND YOUR RIGHT TO RECOVER FROM ORANGE COUNTY IN A LAWSUIT FOR ANY PERSONAL INJURY, INCLUDING DEATH, TO YOUR CHILD OR ANY PROPERTY DAMAGE THAT RESULTS FROM THE RISKS THAT ARE A NATURAL PART OF THE ACTIVITY. YOU HAVE THE RIGHT TO REFUSE TO SIGN THIS FORM, AND ORANGE COUNTY HAS THE RIGHT TO REFUSE TO LET YOUR CHILD PARTICIPATE IF YOU DO NOT SIGN THIS FORM. PARTICIPANT CONSENT RELEASE I (or my child/children) am voluntarily participating in this program, class or event written above. In return for the opportunity to participate, I voluntarily for myself (or my child/children) waive, release, indemnify and hold harmless Orange County and its officers and employees from any liabilities, claims, damages, injuries, losses and expenses including reasonable attorneys fees and cost whatsoever, including those for personal injury, death or property damage, which may arise from or in connection with participation in this program, class or event. Should this registration be for one of my minor children, I hereby consent to emergency treatment and transportation of my minor child for any condition which may arise during, from or in connection with participation in this program, class or event. I agree such photographs shall be the property of Orange County and I am not entitled to compensation of any kind for the use of such photographs. I agree to abide by all county ordinances and Parks and Recreation rules and regulations, and understand that Orange County has the right to close registration and to change fees and requirements when necessary. This release	Emergency Contact Name		Relationship	Work Phone		Mobil	Mobile Phone	
READ THIS FORM COMPLETELY AND CAREFULLY. YOU ARE AGREEING TO LET YOUR MINOR CHILD ENGAGE IN A POTENTIALLY DANGEROUS ACTIVITY, YOU ARE AGREEING THAT, EVEN IF ORANGE COUNTY USES REASONABLE CARE IN PROVIDING THIS ACTIVITY, THERE IS A CHANCE YOUR CHILD MAY BE SERIOUSLY INJURED OR KILLED BY PARTICIPATING IN THIS ACTIVITY BECAUSE THERE ARE CERTAIN DANGERS INHERENT IN THE ACTIVITY WHICH CANNOT BE AVOIDED OR ELIMINATED. BY SIGNING THIS FORM YOU ARE GIVING UP YOUR CHILD'S RIGHT AND YOUR RIGHT TO RECOVER FROM ORANGE COUNTY IN A LAWSUIT FOR ANY PERSONAL INJURY, INCLUDING DEATH, TO YOUR CHILD OR ANY PROPERTY DAMAGE THAT RESULTS FROM THE RISKS THAT ARE A NATURAL PART OF THE ACTIVITY. YOU HAVE THE RIGHT TO REFUSE TO SIGN THIS FORM, AND ORANGE COUNTY HAS THE RIGHT TO REFUSE TO LET YOUR CHILD PARTICIPATE IF YOU DO NOT SIGN THIS FORM. PARTICIPANT CONSENT RELEASE I (or my child/children) am voluntarily participating in this program, class or event written above. In return for the opportunity to participate, I voluntarily for myself (or my child/children) waive, release, indemnify and hold harmless Orange County and its officers and employees from any liabilities, claims, damages, injuries, losses and expenses including reasonable attorneys fees and cost whatsoever, including those for personal injury, death or property damage, which may arise from or in connection with participation in this program, class or event. Should this registration be for one of my minor children, I hereby consent to emergency treatment and transportation of my minor child for any condition which may arise during, from or in connection with participation in this program, class or event. I agree such photographs shall be the property of Orange County and I am not entitled to compensation of any kind for the use of such photographs. I agree to abide by all county ordinances and Parks and Recreation rules and regulations, and understand that Orange County has the right to close registration and to change fees and requirements when necessary. This release	Emergency Contact Name		Relationship	Work Phone		Mobile	Mobile Phone	
READ THIS FORM COMPLETELY AND CAREFULLY. YOU ARE AGREEING TO LET YOUR MINOR CHILD ENGAGE IN A POTENTIALLY DANGEROUS ACTIVITY. YOU ARE AGREEING THAT, EVEN IF ORANGE COUNTY USES REASONABLE CARE IN PROVIDING THIS ACTIVITY, THERE IS A CHANCE YOUR CHILD MAY BE SERIOUSLY INJURED OR KILLED BY PARTICIPATING IN THIS ACTIVITY BECAUSE THERE ARE CERTAIN DANGERS INHERENT IN THE ACTIVITY WHICH CANNOT BE AVOIDED OR ELIMINATED. BY SIGNING THIS FORM YOU ARE GIVING UP YOUR CHILD'S RIGHT AND YOUR RIGHT TO RECOVER FROM ORANGE COUNTY IN A LAWSUIT FOR ANY PERSONAL INJURY, INCLUDING DEATH, TO YOUR CHILD OR ANY PROPERTY DAMAGE THAT RESULTS FROM THE RISKS THAT ARE A NATURAL PART OF THE ACTIVITY. YOU HAVE THE RIGHT TO REFUSE TO SIGN THIS FORM, AND ORANGE COUNTY HAS THE RIGHT TO REFUSE TO LET YOUR CHILD PARTICIPATE IF YOU DO NOT SIGN THIS FORM. PARTICIPANT CONSENT RELEASE I (or my child/children) am voluntarily participating in this program, class or event written above. In return for the opportunity to participate, I voluntarily for myself (or my child/children) waive, release, indemnify and hold harmless Orange County and its officers and employees from any liabilities, claims, damages, injuries, losses and expenses including reasonable attorneys fees and cost whatsoever, including those for personal injury, death or property damage, which may arise from or in connection with participation in this program, class or event and I shall be responsible for the payment of all costs associated with such emergency treatment or transportation. Further, I hereby give permission to Orange County to use any photographs shall be the property of Orange County and I am not entitled to compensation of any kind for the use of such photographs. I agree such photographs shall be the property of Orange County and I am not entitled to compensation of any kind for the use of such photographs. I agree to abide by all county ordinances and Parks and Recreation rules and requirements of the orange County has the right to close registration and to change fee	-		•					
IN A POTENTIALLY DANGEROUS ACTIVITY. YOU ARE AGREEING THAT, EVEN IF ORANGE COUNTY USES REASONABLE CARE IN PROVIDING THIS ACTIVITY, THERE IS A CHANCE YOUR CHILD MAY BE SERIOUSLY INJURED OR KILLED BY PARTICIPATING IN THIS ACTIVITY BECAUSE THERE ARE CERTAIN DANGERS INHERENT IN THE ACTIVITY WHICH CANNOT BE AVOIDED OR ELIMINATED. BY SIGNING THIS FORM YOU ARE GIVING UP YOUR CHILD'S RIGHT AND YOUR RIGHT TO RECOVER FROM ORANGE COUNTY IN A LAWSUIT FOR ANY PERSONAL INJURY, INCLUDING DEATH, TO YOUR CHILD OR ANY PROPERTY DAMAGE THAT RESULTS FROM THE RISKS THAT ARE A NATURAL PART OF THE ACTIVITY. YOU HAVE THE RIGHT TO REFUSE TO SIGN THIS FORM, AND ORANGE COUNTY HAS THE RIGHT TO REFUSE TO LET YOUR CHILD PARTICIPATE IF YOU DO NOT SIGN THIS FORM. PARTICIPANT CONSENT RELEASE I (or my child/children) am voluntarily participating in this program, class or event written above. In return for the opportunity to participate, I voluntarily for myself (or my child/children) waive, release, indemnify and hold harmless Orange County and its officers and employees from any liabilities, claims, damages, injuries, losses and expenses including reasonable attorneys fees and cost whatsoever, including those for personal injury, death or property damage, which may arise from or in connection with participation in this program, class or event and I shall be responsible for the payment of all costs associated with such emergency treatment or transportation. Further, I hereby give permission to Orange County to use any photographs taken by the County, its officers, employees, or agents, of either me or my child/children during participation in this program, class or event. I agree such photographs shall be the property of Orange County and I am not entitled to compensation of any kind for the use of such photographs. I agree to abide by all county ordinances and Parks and Recreation rules and regulations, and understand that Orange County has the right to close registration and to change fees and requirements when necessary. This release shall								
REASONABLE CARE IN PROVIDING THIS ACTIVITY, THERE IS A CHANCE YOUR CHILD MAY BE SERIOUSLY INJURED OR KILLED BY PARTICIPATING IN THIS ACTIVITY BECAUSE THERE ARE CERTAIN DANGERS INHERENT IN THE ACTIVITY WHICH CANNOT BE AVOIDED OR ELIMINATED. BY SIGNING THIS FORM YOU ARE GIVING UP YOUR CHILD'S RIGHT AND YOUR RIGHT TO RECOVER FROM ORANGE COUNTY IN A LAWSUIT FOR ANY PERSONAL INJURY, INCLUDING DEATH, TO YOUR CHILD OR ANY PROPERTY DAMAGE THAT RESULTS FROM THE RISKS THAT ARE A NATURAL PART OF THE ACTIVITY. YOU HAVE THE RIGHT TO REFUSE TO SIGN THIS FORM, AND ORANGE COUNTY HAS THE RIGHT TO REFUSE TO LET YOUR CHILD PARTICIPATE IF YOU DO NOT SIGN THIS FORM. PARTICIPANT CONSENT RELEASE I (or my child/children) waive, release, indemnify and hold harmless Orange County and its officers and employees from any liabilities, claims, damages, injuries, losses and expenses including reasonable attorneys fees and cost whatsoever, including those for personal injury, death or property damage, which may arise from or in connection with participation in this program, class or event. Should this registration be for one of my minor children, I hereby consent to emergency treatment and transportation of my minor child for any condition which may arise during, from or in connection with participation in this program, class or event. I agree such photographs taken by the County, its officers, employees, or agents, of either me or my child/children during participation in this program, class or event. I agree such photographs shall be the property of Orange County and I am not entitled to compensation of any kind for the use of such photograph. I agree to abide by all county ordinances and Parks and Recreation rules and regulations, and understand that Orange County has the right to close registration and to change fees and requirements when necessary. This release shall remain in effect until canceled in writing.								
INJURED OR KILLED BY PARTICIPATING IN THIS ACTIVITY BECAUSE THERE ARE CERTAIN DANGERS INHERENT IN THE ACTIVITY WHICH CANNOT BE AVOIDED OR ELIMINATED. BY SIGNING THIS FORM YOU ARE GIVING UP YOUR CHILD'S RIGHT AND YOUR RIGHT TO RECOVER FROM ORANGE COUNTY IN A LAWSUIT FOR ANY PERSONAL INJURY, INCLUDING DEATH, TO YOUR CHILD OR ANY PROPERTY DAMAGE THAT RESULTS FROM THE RISKS THAT ARE A NATURAL PART OF THE ACTIVITY. YOU HAVE THE RIGHT TO REFUSE TO SIGN THIS FORM, AND ORANGE COUNTY HAS THE RIGHT TO REFUSE TO LET YOUR CHILD PARTICIPATE IF YOU DO NOT SIGN THIS FORM. PARTICIPANT CONSENT RELEASE I (or my child/children) am voluntarily participating in this program, class or event written above. In return for the opportunity to participate, I voluntarily for myself (or my child/children) waive, release, indemnify and hold harmless Orange County and its officers and employees from any liabilities, claims, damages, injuries, losses and expenses including reasonable attorneys fees and cost whatsoever, including those for personal injury, death or property damage, which may arise from or in connection with participation in this program, class or event. Should this registration be for one of my minor children, I hereby consent to emergency treatment and transportation of my minor child for any condition which may arise during, from or in connection with participation in this program, class or event. I agree such photographs taken by the County, its officers, employees, or agents, of either me or my child/children during participation in this program, class or event. I agree such photographs shall be the property of Orange County and I am not entitled to compensation of any kind for the use of such photographs. I agree to abide by all county ordinances and Parks and Recreation rules and regulations, and understand that Orange County has the right to close registration and to change fees and requirements when necessary. This release shall remain in effect until canceled in writing.								
INHERENT IN THE ACTIVITY WHICH CANNOT BE AVOIDED OR ELIMINATED. BY SIGNING THIS FORM YOU ARE GIVING UP YOUR CHILD'S RIGHT AND YOUR RIGHT TO RECOVER FROM ORANGE COUNTY IN A LAWSUIT FOR ANY PERSONAL INJURY, INCLUDING DEATH, TO YOUR CHILD OR ANY PROPERTY DAMAGE THAT RESULTS FROM THE RISKS THAT ARE A NATURAL PART OF THE ACTIVITY. YOU HAVE THE RIGHT TO REFUSE TO SIGN THIS FORM, AND ORANGE COUNTY HAS THE RIGHT TO REFUSE TO LET YOUR CHILD PARTICIPATE IF YOU DO NOT SIGN THIS FORM. PARTICIPANT CONSENT RELEASE I (or my child/children) am voluntarily participating in this program, class or event written above. In return for the opportunity to participate, I voluntarily for myself (or my child/children) waive, release, indemnify and hold harmless Orange County and its officers and employees from any liabilities, claims, damages, injuries, losses and expenses including reasonable attorneys fees and cost whatsoever, including those for personal injury, death or property damage, which may arise from or in connection with participation in this program, class or event. Should this registration be for one of my minor children, I hereby consent to emergency treatment and transportation of my minor child for any condition which may arise during, from or in connection with participation in this program, class or event. I hereby give permission to Orange County to use any photographs taken by the County, its officers, employees, or agents, of either me or my child/children during participation in this program, class or event. I agree such photographs shall be the property of Orange County and I am not entitled to compensation of any kind for the use of such photographs. I agree to abide by all county ordinances and Perks and Recreation rules and regulations, and understand that Orange County has the right to close registration and to change fees and requirements when necessary. This release shall remain in effect until canceled in writing.								
GIVING UP YOUR CHILD'S RIGHT AND YOUR RIGHT TO RECOVER FROM ORANGE COUNTY IN A LAWSUIT FOR ANY PERSONAL INJURY, INCLUDING DEATH, TO YOUR CHILD OR ANY PROPERTY DAMAGE THAT RESULTS FROM THE RISKS THAT ARE A NATURAL PART OF THE ACTIVITY. YOU HAVE THE RIGHT TO REFUSE TO SIGN THIS FORM, AND ORANGE COUNTY HAS THE RIGHT TO REFUSE TO LET YOUR CHILD PARTICIPATE IF YOU DO NOT SIGN THIS FORM. PARTICIPANT CONSENT RELEASE I (or my child/children) am voluntarily participating in this program, class or event written above. In return for the opportunity to participate, I voluntarily for myself (or my child/children) waive, release, indemnify and hold harmless Orange County and its officers and employees from any liabilities, claims, damages, injuries, losses and expenses including reasonable attorneys fees and cost whatsoever, including those for personal injury, death or property damage, which may arise from or in connection with participation in this program, class or event. Should this registration be for one of my minor children, I hereby consent to emergency treatment and transportation of my minor child for any condition which may arise during, from or in connection with participation in this program, class or event and I shall be responsible for the payment of all costs associated with such emergency treatment or transportation. Further, I hereby give permission to Orange County to use any photographs shall be the property of Orange County and I am not entitled to compensation of any kind for the participation in this program, class or event. I agree such photographs shall be the property of Orange County and I am not entitled to compensation of any kind for the use of such photographs. I agree to abide by all county ordinances and Parks and Recreation rules and regulations, and understand that Orange County has the right to close registration and to change fees and requirements when necessary. This release shall remain in effect until canceled in writing. SIGNATURE REQUIRED OF ALL PARTICIPANTS		-		_			-	
FOR ANY PERSONAL INJURY, INCLUDING DEATH, TO YOUR CHILD OR ANY PROPERTY DAMAGE THAT RESULTS FROM THE RISKS THAT ARE A NATURAL PART OF THE ACTIVITY. YOU HAVE THE RIGHT TO REFUSE TO SIGN THIS FORM, AND ORANGE COUNTY HAS THE RIGHT TO REFUSE TO LET YOUR CHILD PARTICIPATE IF YOU DO NOT SIGN THIS FORM. PARTICIPANT CONSENT RELEASE I (or my child/children) am voluntarily participating in this program, class or event written above. In return for the opportunity to participate, I voluntarily for myself (or my child/children) waive, release, indemnify and hold harmless Orange County and its officers and employees from any liabilities, claims, damages, injuries, losses and expenses including reasonable attorneys fees and cost whatsoever, including those for personal injury, death or property damage, which may arise from or in connection with participation in this program, class or event. Should this registration be for one of my minor children, I hereby consent to emergency treatment and transportation of my minor child for any condition which may arise during, from or in connection with participation in this program, class or event and I shall be responsible for the payment of all costs associated with such emergency treatment or transportation. Further, I hereby give permission to Orange County to use any photographs taken by the County, its officers, employees, or agents, of either me or my child/children during participation in this program, class or event. I agree such photographs shall be the property of Orange County and I am not entitled to compensation of any kind for the use of such photographs. I agree to abide by all county ordinances and Parks and Recreation rules and regulations, and understand that Orange County has the right to close registration and to change fees and requirements when necessary. This release shall remain in effect until canceled in writing. BATE								
RESULTS FROM THE RISKS THAT ARE A NATURAL PART OF THE ACTIVITY. YOU HAVE THE RIGHT TO REFUSE TO SIGN THIS FORM, AND ORANGE COUNTY HAS THE RIGHT TO REFUSE TO LET YOUR CHILD PARTICIPATE IF YOU DO NOT SIGN THIS FORM. PARTICIPANT CONSENT RELEASE I (or my child/children) am voluntarily participating in this program, class or event written above. In return for the opportunity to participate, I voluntarily for myself (or my child/children) waive, release, indemnify and hold harmless Orange County and its officers and employees from any liabilities, claims, damages, injuries, losses and expenses including reasonable attorneys fees and cost whatsoever, including those for personal injury, death or property damage, which may arise from or in connection with participation in this program, class or event. Should this registration be for one of my minor children, I hereby consent to emergency treatment and transportation of my minor child for any condition which may arise during, from or in connection with participation in this program, class or event and I shall be responsible for the payment of all costs associated with such emergency treatment or transportation. Further, I hereby give permission to Orange County to use any photographs taken by the County, its officers, employees, or agents, of either me or my child/children during participation in this program, class or event. I agree such photographs shall be the property of Orange County and I am not entitled to compensation of any kind for the use of such photographs. I agree to abide by all county ordinances and Parks and Recreation rules and regulations, and understand that Orange County has the right to close registration and to change fees and requirements when necessary. This release shall remain in effect until canceled in writing. BIGNATURE REQUIRED OF ALL PARTICIPANTS DATE								
PARTICIPANT CONSENT RELEASE I (or my child/children) am voluntarily participating in this program, class or event written above. In return for the opportunity to participate, I voluntarily for myself (or my child/children) waive, release, indemnify and hold harmless Orange County and its officers and employees from any liabilities, claims, damages, injuries, losses and expenses including reasonable attorneys fees and cost whatsoever, including those for personal injury, death or property damage, which may arise from or in connection with participation in this program, class or event. Should this registration be for one of my minor children, I hereby consent to emergency treatment and transportation of my minor child for any condition which may arise during, from or in connection with participation in this program, class or event and I shall be responsible for the payment of all costs associated with such emergency treatment or transportation. Further, I hereby give permission to Orange County to use any photographs taken by the County, its officers, employees, or agents, of either me or my child/children during participation in this program, class or event. I agree such photographs shall be the property of Orange County and I am not entitled to compensation of any kind for the use of such photographs. I agree to abide by all county ordinances and Parks and Recreation rules and regulations, and understand that Orange County has the right to close registration and to change fees and requirements when necessary. This release shall remain in effect until canceled in writing. BATE SIGNATURE REQUIRED OF ALL PARTICIPANTS		•	,					
PARTICIPANT CONSENT RELEASE I (or my child/children) am voluntarily participating in this program, class or event written above. In return for the opportunity to participate, I voluntarily for myself (or my child/children) waive, release, indemnify and hold harmless Orange County and its officers and employees from any liabilities, claims, damages, injuries, losses and expenses including reasonable attorneys fees and cost whatsoever, including those for personal injury, death or property damage, which may arise from or in connection with participation in this program, class or event. Should this registration be for one of my minor children, I hereby consent to emergency treatment and transportation of my minor child for any condition which may arise during, from or in connection with participation in this program, class or event and I shall be responsible for the payment of all costs associated with such emergency treatment or transportation. Further, I hereby give permission to Orange County to use any photographs taken by the County, its officers, employees, or agents, of either me or my child/children during participation in this program, class or event. I agree such photographs shall be the property of Orange County and I am not entitled to compensation of any kind for the use of such photographs. I agree to abide by all county ordinances and Parks and Recreation rules and regulations, and understand that Orange County has the right to close registration and to change fees and requirements when necessary. This release shall remain in effect until canceled in writing. SIGNATURE REQUIRED OF ALL PARTICIPANTS DATE	TO SIGN THIS FORM, AND O	RANGE COUN	TY HAS THE F	RIGHT TO) REF	USE TO LE	T YOUR	CHILD PARTICIPATE
I (or my child/children) am voluntarily participating in this program, class or event written above. In return for the opportunity to participate, I voluntarily for myself (or my child/children) waive, release, indemnify and hold harmless Orange County and its officers and employees from any liabilities, claims, damages, injuries, losses and expenses including reasonable attorneys fees and cost whatsoever, including those for personal injury, death or property damage, which may arise from or in connection with participation in this program, class or event. Should this registration be for one of my minor children, I hereby consent to emergency treatment and transportation of my minor child for any condition which may arise during, from or in connection with participation in this program, class or event and I shall be responsible for the payment of all costs associated with such emergency treatment or transportation. Further, I hereby give permission to Orange County to use any photographs taken by the County, its officers, employees, or agents, of either me or my child/children during participation in this program, class or event. I agree such photographs shall be the property of Orange County and I am not entitled to compensation of any kind for the use of such photographs. I agree to abide by all county ordinances and Parks and Recreation rules and regulations, and understand that Orange County has the right to close registration and to change fees and requirements when necessary. This release shall remain in effect until canceled in writing. SIGNATURE REQUIRED OF ALL PARTICIPANTS DATE	IF YOU DO NOT SIGN THIS F	ORM.						
child/children) waive, release, indemnify and hold harmless Orange County and its officers and employees from any liabilities, claims, damages, injuries, losses and expenses including reasonable attorneys fees and cost whatsoever, including those for personal injury, death or property damage, which may arise from or in connection with participation in this program, class or event. Should this registration be for one of my minor children, I hereby consent to emergency treatment and transportation of my minor child for any condition which may arise during, from or in connection with participation in this program, class or event and I shall be responsible for the payment of all costs associated with such emergency treatment or transportation. Further, I hereby give permission to Orange County to use any photographs taken by the County, its officers, employees, or agents, of either me or my child/children during participation in this program, class or event. I agree such photographs shall be the property of Orange County and I am not entitled to compensation of any kind for the use of such photographs. I agree to abide by all county ordinances and Parks and Recreation rules and regulations, and understand that Orange County has the right to close registration and to change fees and requirements when necessary. This release shall remain in effect until canceled in writing. SIGNATURE REQUIRED OF ALL PARTICIPANTS DATE								
expenses including reasonable attorneys fees and cost whatsoever, including those for personal injury, death or property damage, which may arise from or in connection with participation in this program, class or event. Should this registration be for one of my minor children, I hereby consent to emergency treatment and transportation of my minor child for any condition which may arise during, from or in connection with participation in this program, class or event and I shall be responsible for the payment of all costs associated with such emergency treatment or transportation. Further, I hereby give permission to Orange County to use any photographs taken by the County, its officers, employees, or agents, of either me or my child/children during participation in this program, class or event. I agree such photographs shall be the property of Orange County and I am not entitled to compensation of any kind for the use of such photographs. I agree to abide by all county ordinances and Parks and Recreation rules and regulations, and understand that Orange County has the right to close registration and to change fees and requirements when necessary. This release shall remain in effect until canceled in writing. SIGNATURE REQUIRED OF ALL PARTICIPANTS DATE								
during, from or in connection with participation in this program, class or event and I shall be responsible for the payment of all costs associated with such emergency treatment or transportation. Further, I hereby give permission to Orange County to use any photographs taken by the County, its officers, employees, or agents, of either me or my child/children during participation in this program, class or event. I agree such photographs shall be the property of Orange County and I am not entitled to compensation of any kind for the use of such photographs. I agree to abide by all county ordinances and Parks and Recreation rules and regulations, and understand that Orange County has the right to close registration and to change fees and requirements when necessary. This release shall remain in effect until canceled in writing. SIGNATURE REQUIRED OF ALL PARTICIPANTS DATE			ver, including those f	or personal ir	njury, dea	ath or property d	amage, whic	ch may arise from or in connection
participation in this program, class or event. I agree such photographs shall be the property of Orange County and I am not entitled to compensation of any kind for the use of such photographs. I agree to abide by all county ordinances and Parks and Recreation rules and regulations, and understand that Orange County has the right to close registration and to change fees and requirements when necessary. This release shall remain in effect until canceled in writing. SIGNATURE REQUIRED OF ALL PARTICIPANTS DATE	during, from or in connection with participa		•	•				
	participation in this program, class or event use of such photographs. I agree to abide b	. I agree such photog by all county ordinance	graphs shall be the pees and Parks and Re	roperty of Or ecreation rule	range Co es and re	unty and I am n gulations, and u	ot entitled to nderstand th	compensation of any kind for the
lf under 18, signature of custodial parent/legal guardian					DATE			



ORANGE COUNTY GOVERNMENT HUMAN RESOURCES DIVISION

Social Security Number Collection Disclosure Statement

Pursuant to Section 119.071(5), Florida Statutes, Orange County Government is requesting your social security number (SSN) for one or more of the following purposes: to comply with federal laws requiring the County to report income and SSNs for all employees and eligible retirees to whom it pays compensation; to maintain internal identification and to track records for use in administering payroll, tax reporting and benefits processing; to verify employment status, history and eligibility; to conduct background checks and drug test screening.

Orange County Government is dedicated to ensuring the proper handling of confidential information relating to its employees and to ensuring their privacy.



Background Investigation Disclosure and Authorization



Background Investigation Disclosure

Orange County Parks and Recreation (the Company) may obtain information about you from a third party consumer reporting agency for participation purposes. A consumer report is a compilation of information that might affect your ability to participate with the Company. Thus, you may be the subject of a consumer report which may include information about your character, general reputation, personal characteristics, and/or mode of living. These reports may contain information regarding your criminal history, social security verification, motor vehicle records (driving records), verification of your education or employment history (including income), or other background checks. You have the right, upon written request made within a reasonable time, to request whether a consumer report has been run about you and to request a copy of your report. These searches will be conducted by the National Center for Safety Initiatives (NCSI); 1853 Piedmont Road Suite 100, Marietta, GA 30066; tel. # 866-996-7412; www.solutions.ncsisafe.com. To the extent permitted by law, the Company may obtain consumer reports from any outside organization throughout the course of your participation.

Acknowledgment and Authorization

I have carefully read and understand the disclosure regarding procurement of consumer reports provided by Orange County Parks and Recreation (the Company) and this authorization to obtain a consumer report. By my signature below, I hereby consent to the preparation by the National Center for Safety Initiatives (NCSI), a consumer reporting agency located at 1853 Piedmont Road Suite 100, Marietta, GA 30066; tel. #866-996-7412; www.solutions.ncsisafe.com, of background reports regarding me and the release of such reports to the Company and its designated representatives, to assist the Company in making a participation decision involving me at any time after receipt of this authorization and throughout my participation engagement, to the extent permitted by law. By my signature below, I hereby authorize, without reservation, any state or federal law enforcement agency or court, educational institution, motor vehicle record agency, credit bureau or other information service bureau or data repository, or employer to furnish any and all information regarding me to NCSI and/or the Company itself and authorize NCSI to provide such information to the Company. I further certify the information provided on and in connection with this form is true, accurate and complete. I agree that a facsimile ("fax"), electronic or photographic copy of this Authorization shall be as valid as the original.

I acknowledge receipt of a copy of the Consumer Financial Protection Bureau's A SUMMARY OF YOUR RIGHTS UNDER THE FAIR CREDIT REPORTING ACT.

First Name	Full Middle	Last Name

Para información en español, visite www.consumerfinance.gov/learnmore o escribe a la Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20552.

A Summary of Your Rights Under the Fair Credit Reporting Act

The federal Fair Credit Reporting Act (FCRA) promotes the accuracy, fairness, and privacy of information in the files of consumer reporting agencies. There are many types of consumer reporting agencies, including credit bureaus and specialty agencies (such as agencies that sell information about check writing histories, medical records, and rental history records). Here is a summary of your major rights under FCRA. For more information, including information about additional rights, go to www.consumerfinance.gov/learnmore or write to: Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20552.

You must be told if information in your file has been used against you. Anyone who uses a credit report or another type of consumer report to deny your application for credit, insurance, or employment – or to take another adverse action against you – must tell you, and must give you the name, address, and phone number of the agency that provided the information.

You have the right to know what is in your file. You may request and obtain all the information about you in the files of a consumer reporting agency (your "file disclosure"). You will be required to provide proper identification, which may include your Social Security number. In many cases, the disclosure will be free. You are entitled to a free file disclosure if:

- a person has taken adverse action against you because of information in your credit report;
- · you are the victim of identity theft and place a fraud alert in your file;
- · your file contains inaccurate information as a result of fraud;
- you are on public assistance;
- you are unemployed but expect to apply for employment within 60 days.

In addition, all consumers are entitled to one free disclosure every 12 months upon request from each nationwide credit bureau and from nationwide specialty consumer reporting agencies. See www.consumerfinance.gov/learnmore for additional information.

You have the right to ask for a credit score. Credit scores are numerical summaries of your credit-worthiness based on information from credit bureaus. You may request a credit score from consumer reporting agencies that create scores or distribute scores used in residential real property loans, but you will have to pay for it. In some mortgage transactions, you will receive credit score information for free from the mortgage lender.

You have the right to dispute incomplete or inaccurate information. If you identify information in your file that is incomplete or inaccurate, and report it to the consumer reporting agency, the agency must investigate unless your dispute is frivolous. See www.consumerfinance.gov/learnmore for an explanation of dispute procedures.

Consumer reporting agencies must correct or delete inaccurate, incomplete, or unverifiable information. Inaccurate, incomplete, or unverifiable information must be removed or corrected, usually within 30 days. However, a consumer reporting agency may continue to report information it has verified as accurate.

Consumer reporting agencies may not report outdated negative information. In most cases, a consumer reporting agency may not report negative information that is more than seven years old, or bankruptcies that are more than 10 years old.

Access to your file is limited. A consumer reporting agency may provide information about you only to people with a valid need – usually to consider an application with a creditor, insurer, employer, landlord, or other business. The FCRA specifies those with a valid need for access.

You must give your consent for reports to be provided to employers. A consumer reporting agency may not give out information about you to your employer, or a potential employer, without your written consent given to the employer. Written consent generally is not required in the trucking industry. For more information, go to www.consumerfinance.gov/learnmore.

You may limit "prescreened" offers of credit and insurance you get based on information in your credit report. Unsolicited "prescreened" offers for credit and insurance must include a toll-free phone number you can call if you choose to remove your name and address form the lists these offers are based on. You may opt out with the nationwide credit bureaus at 1-888-5-OPTOUT (1-888-567-8688).

The following FCRA right applies with respect to nationwide consumer reporting agencies:

CONSUMERS HAVE THE RIGHT TO OBTAIN A SECURITY FREEZE

You have a right to place a security freeze on your credit report, which will prohibit a consumer reporting agency from releasing information in your credit report without your express authorization. The security freeze is designed to prevent credit, loans, and services from being approved in your name without your consent. However, you should be aware that using a security freeze to take control over who gets access to the personal and financial information in your credit report may delay, interfere with, or prohibit the timely approval of any subsequent request or application you make regarding a new loan, credit, mortgage, or any other account involving the extension of credit.

As an alternative to a security freeze, you have the right to place an initial or extended fraud alert on your credit file at no cost. An initial fraud alert is a 1-year alert that is 3 placed on a consumer's credit file. Upon seeing a fraud alert display on a consumer's credit file, a business is required to take steps to verify the consumer's identity before extending new credit. If you are a victim of identity theft, you are entitled to an extended fraud alert, which is a fraud alert lasting 7 years.

A security freeze does not apply to a person or entity, or its affiliates, or collection agencies acting on behalf of the person or entity, with which you have an existing account that requests information in your credit report for the purposes of reviewing or collecting the account. Reviewing the account includes activities related to account maintenance, monitoring, credit line increases, and account upgrades and enhancements.

You may seek damages from violators. If a consumer reporting agency, or, in some cases, a user of consumer reports or a furnisher of information to a consumer reporting agency violates the FCRA, you may be able to sue in state or federal court.

Identity theft victims and active duty military personnel have additional rights. For more information, visit www.consumerfinance.gov/learnmore.

States may enforce the FCRA, and many states have their own consumer reporting laws. In some cases, you may have more rights under state law. For more information, contact your state or local consumer protection agency or your state Attorney General.

For information about your federal rights, contact:

TYPE OF BUSINESS

- a. Banks, savings associations, and credit unions with total assets of over \$10 billion and their affiliates.
 - Such affiliates that are not banks, savings associations, or credit unions also should list, in addition to the CFPB.
- 2. To the extent not included in item 1 above:
 - a. National banks, federal savings associations, and federal branches and federal agencies of foreign banks
 - b. State member banks, branches and agencies of foreign banks (other than federal branches, federal agencies, and Insured State Branches of Foreign Banks), commercial lending companies owned or controlled by foreign banks, and organizations operating under section 25 or 25A of the Federal Reserve Act.
 - Nonmember Insured Banks, Insured State Branches of Foreign Banks, and insured state savings associations
 - d. Federal Credit Unions
- 3. Air carriers
- 4. Creditors Subject to the Surface Transportation Board
- 5. Creditors Subject to the Packers and Stockyards Act, 1921
- 6. Small Business Investment Companies
- 7. Brokers and Dealers
- Federal Land Banks, Federal Land Bank Associations, Federal Intermediate Credit Banks, and Production Credit Associations
- Retailers, Finance Companies, and All Other Creditors Not Listed Above

CONTACT

- a. Consumer Financial Protection Bureau 1700 G Street, N.W. Washington, DC 20552
 - b. Federal Trade Commission Consumer Response Center, 600 Pennsylvania Avenue, N.W., Washington, DC 20580 (877) 382-4357
- a. Office of the Comptroller of the Currency Customer Assistance Group 1301 McKinney Street, Suite 3450 Houston, TX 77010-9050
 - Federal Reserve Consumer Help Center, P.O. Box 1200 Minneapolis, MN 55480
 - c. FDIC Consumer Response Center 1100 Walnut Street, Box #11 Kansas City, MO 64106
 - d. National Credit Union Administration
 Office of Consumer Financial Protection (OCFP)
 Division of Consumer Compliance Policy and Outreach
 1775 Duke Street, Alexandria, VA 22314
- Asst. General Counsel for Aviation Enforcement & Proceedings Aviation Consumer Protection Division Department of Transportation 1200 New Jersey Avenue, S.E., Washington, DC 20590
- Office of Proceedings, Surface Transportation Board Department of Transportation 395 E Street, S.W., Washington, DC 20423
- 5. Nearest Packers and Stockyards Administration area supervisor.
- Associate Deputy Administrator for Capital Access United States Small Business Administration 409 Third Street, S.W., Suite 8200, Washington, DC 20416
- Securities and Exchange Commission 100 F Street, N.E., Washington, DC 20549
- Farm Credit Administration 1501 Farm Credit Drive McLean VA 22102-5090
- Federal Trade Commission Consumer Response Center 600 Pennsylvania Avenue, N.W., Washington, DC 20580 (877) 382-4357



Background Screening Request



Applicant name:							
First Name	Full Middle	Last Name					
List all other names you have used: (Alias, maider	n)						
Applicant information Social Security Number	Date of Birth	Cau					
Social Security Number	Date of Birth	Sex Male Female					
Race Black White Hispanic	Asian/Pacific Islander America	an Indian					
Present Address (NO P.O. Box addresses)	City	State ZIP					
Phone	Email						
Have you ever been convicted of or arrested for a MISDEMEANOR or FELONY other than minor traffic violations and/or placed on probation, fined or given a suspended sentence in court? Include any convictions by military trial and any criminal charges for which you are awaiting trial. List all cases other than minor traffic violations. Driving under the influence, reckless, and/or hit-and-run charges are not minor traffic violations. Your fingerprints may, at some point, be sent to State and Federal agencies and all service will be subject to satisfactory review of any criminal convictions. NOTE: A full disclosure by you is to your advantage, as your record does not constitute an automatic bar to service. Factors such as, but not limited to, age at time of offense(s) and recency of offense(s) as well as the relationship between the offense(s) and the job(s) for which you apply will be taken into account. FAILURE TO ADMIT CONVICTIONS SHALL RESULT IN DISQUALIFICATION.							
∐YES ∐NO							
Screening and Eligibility		yees, and contractors shall be screened. Annual					
Division shall incur all costs of the background reports shall be used for the purpose of determ Orange County Parks and Recreation. All arrest related to the volunteer position. In these situations	d screenings. All information received ining applicant's eligibility as an emets and convictions shall be examined ations eligibility determinations are erves the right to make changes to the	arks and Recreation. The Parks and Recreation ed from the background check applications and ployee, contractor, volunteer or participant with ed in order to determine whether the incident is based on a minimum of the last five years. The Background Screening Eligibility Criteria whenever the applicant.					
	oor or on call applicant shall be accept	tod who has been					
NO student intern, contractor, casual labor, volunt A. Arrested or convicted of any crime involving so B. Arrested or convicted for any type of violent or C. Arrested or convicted of any crime involving ill D. Arrested or convicted of child abuse or domes	exual misconduct with or against a mir ime. egal drugs or alcohol						
FOR VOLUNTEERS ONLY	and a seed Decreased an arranged in a seed	tion to the Division Management of the control of t					
Any volunteer denied work with Orange County Parks and Recreation may appeal in writing to the Division Manager for reconsideration. The volunteer must be willing to produce and discuss his or her record(s).							
REASON FOR SCREENING							
(Check one) Employment Vendor	☐ Instructor ☐ Vo	lunteer Returning Volunteer					
COACHES ONLY Sport Season	Age Group # of teams	Coach					
Colocii	/ tgc droup	Head Assistant					
ADMINISTRATIVE USE ONLY							
Site Location		Date Received					
Program		Season					
Site Supervisor Approval	Program Manager Approval	<u> </u>					

Page 1 of 1 OCPR-FM31 8/25