



Village Green Community Center
26159 Dulay Road NE, Kingston, WA 98346 (360) 297-1263
www.myvillagegreen.org

APPLICATION TO VOLUNTEER

NAME (last)	(initial)	(first)
TELEPHONE (home)	(cell)	
STREET ADDRESS		
CITY		ZIP
MAILING ADDRESS		
CITY		ZIP
DRIVERS LICENSE #		STATE
EMAIL ADDRESS		
SKILLS / EXPERIENCE		
Day(s) Available:		Hours:
Special Requests/Concerns/Health Limitations:		
T-shirt size (if needed for event):		

Volunteers are the reason the Village Green Community Center exists and how we will continue to serve the community for generations to come. We value your time and the skills you will share. We are always open to ideas – come in a talk with the Volunteer Coordinator about how you can help. A background check is required. Please complete the attached Washington State Patrol form.

Where do you want to help?

- Community Center Office (Clerical, reception and more)
- Setup / Teardown of events
- Event help – Audio Visual needs, etc.
- Tour guide, information point person
- Security
- Other _____

Signature _____ Date _____

Complete this application and deliver or mail to the Village Green Community Center c/o Volunteer Coordinator, 26159 Dulay Road NE, Kingston, WA, 98346. Email programs@myvillagegreen.org with questions and/or comments.

Date Received: _____

Resident: YES / NO

WSP Check completed satisfactorily: Date _____

WASHINGTON STATE PATROL
Request for Criminal History Information
Child / Adult Abuse Information Act
RCW 43.43.830 – 43.43.845

Last Name	First	Initial
Alias / Maiden Name		
Drivers License #	State	
Birth Date	Gender	Race
Street Address	City	Zip
Mailing Address	City	Zip
Home Telephone	Work Telephone	
NOTE: All information used for the purpose of this background check will be handled confidentially and will not be used for any other purpose.		

WSP BACKGROUND CHECK Businesses and/or organizations providing services to developmentally disabled persons, children under 16 and vulnerable adults shall require applicants for employment or volunteer positions to disclose, under penalty of perjury, those convictions and findings which are felonious and/or related to the above-mentioned vulnerable populations. (RCW 43.43.830 – 43.43.845) **Please complete the attached Washington State Patrol Request for Criminal History Information**

A Have you every been convicted of a crime? If so, please list the crime, the date of the conviction, and the state/county in which you were convicted: **YES** _____ **NO** _____

B Have you every had findings made against you in court or administrative proceeding for domestic violence, abuse, sexual abuse, neglect, or exploitation of a child or vulnerable adult? If so, please list the finding made, the date of the fining, and he state/county in which the finding was made:

YES _____ **NO** _____

C Have you ever had both a conviction under (a) and a finding made against you under (b)? If so, please list the crime and finding, the date of conviction and finding and the state/county, which the conviction and finding were made:

YES _____ **NO** _____

Authorization for WSP Background check: I (please print name) _____ do hereby give the Village Green MPD permission to submit the information contained on this page to the Washington State Patrol for a criminal background check.

Indemnification / Hold Harmless User shall indemnify and hold harmless the Village Green Metropolitan Park District, its officers, officials, employees and volunteers from and against any and all claims, suits, actions, or liabilities for injury or death of any person, or for loss or damage to property, which arises out of use of Premises or from any activity, work or thing done, permitted, or suffered by User in or about the Premises, except only such injury or damage as shall have been occasioned by the sole negligence of the Village Green Metropolitan Park District. **Photo/Video Release:** I grant full permission to use any photographs, video, motion pictures, recordings or any other record of this program for promotion of the Village Green Metropolitan Park District. **Standards of Behavior:** The MPD will not tolerate harassment of any kind that is made by employees or patrons towards employees or patrons. Harassment is defined as verbal or physical conduct that demeans or shows hostility or aversion toward another person. If a participant does not agree with the decision, an appeal to the MPD Commission is the final option.

Signature _____ **Date** _____

Village Green Program requesting screening: _____

Resident: YES / NO

WSP Check completed satisfactorily: Date _____

Complete this application and deliver or mail to the Village Green Community Center c/o Program Coordinator, 26159 Dulay Road NE, Kingston, WA, 98346. Email programs@myvillagegreen.org with questions and/or comments.