

**Authorization For Release of Information
INDIVIDUAL DRIVER QUESTIONNAIRE**

I hereby authorize the release to the Boys & Girls Club of Collier County, Florida, Inc., of any records or information concerning my driving record and any crime committed or alleged to have been committed by me.

This includes, but is not limited to, arrest records and conviction data. I hereby release any governmental, police or other agency as custodian of such records, including all officers, employees or related personnel, both individually and collectively, from any and all liability for damages of any type which may at any time result to me, my heirs, family or associates because of compliance with this authorization.

Name of Driver (as shown on Driver's License):	Name (as shown on Social Security Card):
Driver's License Number:	Social Security Number:
State where License was issued:	Date of Birth:
Class Type of License: _____ Check All That Apply: Passenger: _____ 16 Passenger and Up: _____ Commercial: _____ Bus w/Air Brakes: _____ Truck: _____	Expiration Date of License: _____ Is License Currently Valid: ____YES ____NO

**NUMBER OF ACCIDENTS & VIOLATIONS INCLUDING: DUI, TRAFFIC & MOVING VIOLATIONS ETC.
If none, please place an N/A in the boxes below**

# of Accidents	# of Violations	Date of Accident or Violation	Explanation

Has your license ever been suspended or revoked for any period of time? _____NO _____YES

If yes, for how long and give a detailed reason for the suspension/revocation? _____

Volunteer Signature

Date



**Boys & Girls Club of Collier County
Drug-Free Workplace Policy**

Effective immediately, the Boys & Girls Club of Collier County is implementing a Drug-Free Workplace Program to ensure that our business operations are free from the adverse effects of drugs and alcohol. It is a condition of volunteer service at the Boys & Girls Club of Collier County for volunteers to refrain from taking illegal drugs on or off the job and from using alcohol on the job.

**Boys & Girls Club of Collier County
Confidentiality Policy Statement**

It is the policy of the Boys & Girls Club of Collier County that no staff member or volunteer should at any time discuss their personal lives or situations with any Boys & Girls Club member. This includes having a conversation with fellow staff members or volunteers in the presence of club members. Information regarding Club members, paid staff and volunteers, both verbal and written is privileged and confidential.

**Boys & Girls Club of Collier County
Child Abuse Policy and Procedures**

The following policy and procedures concerning child abuse will be adhered to in all cases by all staff, employees and volunteers:

1. If you as a volunteer suspect and/or are knowledgeable of any form of abuse (physical, sexual, etc.) of a child at any Boys & Girls Club facility/program, it should be reported immediately to the Unit Director through your immediate supervisor. The Unit Director is responsible for verbally reporting the suspicion to the appropriate authorities noting the name of the person or persons of the above authority who took the report.
2. A detailed written report will be required and must be submitted within 24 hours, following the procedures outlined in paragraph one.
3. If a volunteer is suspected/accused of abuse, the following guidelines will be followed:
 - (A) Report of the abuse shall be made to the authorities with the understanding that we are not making a judgment until a full complete investigation is made.
 - (B) Volunteer shall be suspended until the authorities give a complete conclusion where the charge is founded or unfounded. Reasonable time should be within 4 to 5 days maximum.
 - (C) Should authorities determine the suspected abuse by the volunteer is founded; the individual will be terminated immediately, with cause.

I understand and agree to the above three policies as a condition of my volunteer service. I understand that failure to follow the Drug Free Workplace Policy, the Confidentiality Policy Statement, and the Child Abuse Policy and Procedures will result in my no longer serving as a volunteer.

Volunteer Signature

Date



Boys & Girls Club of Collier County Affidavit of Good Moral Character

As an applicant for volunteering _____ (name), in a position of trust with the Boys & Girls Club of Collier County, Florida, Inc., I hereby attest to meeting the requirements for volunteering, that I am of good moral character, that I have not been found guilty of, regardless of adjudication, or having entered a plea of nolo contendere or guilty to, any felony, prohibited under any state's laws, or having had a finding of delinquency or entered a plea of nolo contendere or plea amounting to an admission of guilt to a petition alleging delinquency pursuant to Florida Statutes, or statutes of other jurisdictions, regardless of adjudication or disposition and regardless of whether or not those records have been sealed or expunged.

I further attest that I have not been judicially determined to have committed abuse against a child, or to have a confirmed report of abuse or have committed an act, which constitutes domestic violence, as defined in the Florida Statutes or my other state's statutes.

Under the penalties of perjury, I declare that I have read the foregoing, and the facts alleged are true to the best of my knowledge and belief.

Volunteer Signature

Date

PLEASE READ CAREFULLY

**My record may contain one of the foregoing disqualifying acts or offenses.
(Sign here **ONLY** if there may be a disqualifying act or offense in your background.)**

Volunteer Signature

Date



Volunteer Affidavit

I attest my name is _____ and
(Print volunteer/foster grandparent name)

serve in the program known as **Boys & Girls Club of Collier County – 21st CCLC**

I serve as a (check one):

Volunteer – As a volunteer, I do not receive any form of payment or compensation such as money, free or reduced child care, or any other type of compensation for my time. I also understand that as a volunteer, I must be under the constant supervision of a trained and screened staff person and may not be left alone or in charge of any group of children. If I volunteer 10 hours or more per month, or receive some form of compensation, I understand that I must submit background screening information in accordance with section 402.3055, Florida Statutes, and complete the state mandated training requirements.

Foster Grandparent – As a foster grandparent, I adhere to all of the Foster Grandparent Program Guidelines pursuant to Title 45, Public Welfare, Code of Federal Regulations, section 2552.75. I also understand I must be under the constant supervision of a trained and screened staff person and may not be left alone or in charge of any group of children and complete training as outlined in the rule 65C-22.003(1)(m) or rule 65C-20.009(1)(a), Florida Administrative Code.

I attest that I have read the foregoing, and the facts alleged are true and correct.

Volunteer/Foster Grandparent Signature

Date

To Be Completed by the Owner/Operator/Director

I attest my name is _____,
(Print owner/operator/director name)

and I am the owner/operator/director of the program identified above. The above
(Circle one)

Individual serves, under the above definition, as a volunteer/foster grandparent in
(Circle one)

this program.

I attest that I have read the foregoing, and the facts alleged are true and correct.

Owner/Operator/Director Signature

Date

Volunteer Agreement

The VOLUNTEER agrees to:

1. Be friendly, courteous and helpful to Club members, staff and others, understanding that there are a multitude of programs and services happening each day, outside of the volunteer service area;
2. Work a pre-determined schedule and assignment and/or follow the guidelines for alerting the Volunteer Coordinator by 2:00 PM for changes or additions to schedules;
3. Attend training and orientation to become familiar with policies and procedures (written and verbal) of the Boys & Girls Club of Collier County;
4. Inform Volunteer Coordinator of any problems, concerns or ideas to better serve the youth of our Club;
5. Adhere to all policies and procedures of volunteer service and understand that the organization has to follow the same rules as volunteers and does not dictate legal requirements or insurance rulings.

The CLUB agrees to:

1. Respect the function of the volunteer and contribute to a cohesive working relationship between the volunteer and the Club;
2. Provide adequate training, supervision and communication;
3. Fairly evaluate the service(s) provided by the volunteer on a regular basis;
4. Be available to discuss identified concerns in a courteous and professional manner.
5. Recognize the important service the volunteer provides and the critical positive impact it can have on the life of the child!

I have read and understand the volunteer agreement and agree to the defined terms:

Volunteer

Date

Volunteer Coordinator

Date

Volunteer Assignment/Placement	Start Date
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Copy for Volunteer
Copy for Organization



RELEASE AND INDEMNITY AGREEMENT

I wish to provide volunteer services ("Services") for the Boys & Girls Club of Collier County, Florida, Inc. (the "Club"). Although I will not be providing the Services as an employee of the Club and will have no right to receive monetary compensation for the Services, the opportunity to provide these Services has value to me, and I enter this Agreement in exchange for this opportunity.

I understand and agree that I will provide the Services voluntarily and at my own risk. As consideration for being permitted to provide the Services, I hereby release and covenant not to sue the Club, or any of its past, present, or future officers, directors, employees, volunteers, agents, successors, assigns, affiliates, donors, and sponsors (collectively referred to as "Releasees") from and for all claims that I may now or hereafter have against any Releasee which arise out of the Services or my presence at the Club or at a Club event. The claims covered by this release include but are not limited to all claims for personal injury, property damage, or other damage based on the acts, omissions, or negligence (including any and all claims based on strict liability) of any Releasee before, during or after the Services. I also agree to defend, indemnify and hold Releasees harmless for all claims by other parties that arise out of my conduct, regardless of whether an act, omission or negligence (including any and all claims based on strict liability) of a Releasee contributes in whole or part to the claim.

Florida law shall govern this Agreement. Venue for any dispute arising out of the Services shall be exclusively in Collier County, Florida or in the United States District Court, Middle District of Florida, Ft. Myers Division, and any such dispute shall be decided by a judge without a jury. I hereby waive any rights I may have to a jury trial in the event of a dispute arising out of the Services. The prevailing party in any dispute arising out of the Services shall be entitled to recover their reasonable attorneys' fees and costs.

I HAVE CAREFULLY READ THIS AGREEMENT AND FULLY UNDERSTAND ITS CONTENTS. NO PROMISES HAVE BEEN MADE TO ME TO CAUSE ME TO ENTER THIS AGREEMENT, AND I ENTER THIS AGREEMENT VOLUNTARILY AND SOLELY UPON MY OWN JUDGMENT.

(printed name)

(signature)

(date)