



## VOLUNTEER ENROLLMENT APPLICATION

Please complete and return this form to:

Volunteer Coordinator, Parks and Recreation Department - City of Kannapolis  
 401 Laureate Way, Kannapolis, NC 28081

**SECTION A PERSONAL INFORMATION**

**NAME**

\_\_\_\_\_

FIRST MIDDLE LAST NAME I PREFER TO BE CALLED

**ADDRESS**

\_\_\_\_\_

MAILING ADDRESS PHYSICAL ADDRESS (if different)

\_\_\_\_\_

CITY STATE ZIP CODE

**TELEPHONE**

\_\_\_\_\_

MOBILE HOME WORK

**EMAIL**

\_\_\_\_\_

**EMERGENCY**

**CONTACT**

\_\_\_\_\_

FIRST & LAST NAME RELATIONSHIP PHONE NUMBER

**SECTION B VOLUNTEER INTERESTS**

**VOLUNTEER POSITION APPLYING FOR** \_\_\_\_\_

**I'D BE MOST INTERESTED IN....**

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Ongoing volunteer work - a regular committment of 1 month or more.     | <input type="checkbox"/> Projects where I can work with a group.      | <input type="checkbox"/> Other: _____   |
| <input type="checkbox"/> Short term project or task that I can accomplish in a single day/week. | <input type="checkbox"/> Projects I can complete at home or remotely. | <input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F <input type="checkbox"/> Sa <input type="checkbox"/> Su |
|   |   | <input type="checkbox"/> Mornings <input type="checkbox"/> Afternoons <input type="checkbox"/> Evenings   |

**AREAS OF INTEREST**

- |                                   |                                     |   |                                       |
|-----------------------------------|-------------------------------------|---|---------------------------------------|
| <input type="checkbox"/> Children | <input type="checkbox"/> Coaching   | <input type="checkbox"/> Instructor                         | <input type="checkbox"/> Committee    |
| <input type="checkbox"/> Teens    | <input type="checkbox"/> Baseball   | <input type="checkbox"/> Special Events                     | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Adults   | <input type="checkbox"/> Basketball | <input type="checkbox"/> Gardening & Landscaping            |                                       |
| <input type="checkbox"/> Families | <input type="checkbox"/> Football   | <input type="checkbox"/> Marketing & Public Relations       |                                       |
| <input type="checkbox"/> Seniors  | <input type="checkbox"/> Softball   | <input type="checkbox"/> Office Administration/Receptionist |                                       |

**WILL THIS FULFILL A SCHOOL REQUIREMENT OR WILL YOU RECEIVE SCHOOL CREDIT FOR YOUR SERVICE:**  Yes  No

**IF YES....** Is this a Service-Learning Experience?  Yes  No

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NAME OF SCHOOL

NUMBER OF HOURS NEEDED

DEADLINE

**SECTION C BACKGROUND INVESTIGATION**

If you are 16 years of age or older and want to serve in any volunteer capacity, you must undergo an annual background check (with exception of serving on a board, commission, or at a special Event). For this purpose, a special event volunteer is defined as a volunteer who is assisting with an event or project lasting less than one week. A copy of the Kannapolis Parks and Recreation volunteer screening process is found in the Volunteer Services Orientation Manual. A signed Authorization for Release of Personal Information for Employment/Volunteer Purposes is required.

**SECTION D VOLUNTEER CONSENT AND WAIVER**

I agree to conform to Kannapolis Parks and Recreation rules and procedures to the best of my ability and agree to respect the confidential nature of information I may obtain as a volunteer for Kannapolis Parks and Recreation Department. I understand that a criminal records check may be conducted. I also understand that Kannapolis Parks and Recreation reserves the right to discontinue the services of any volunteer at any time.

I understand that I will not be paid for my services as a volunteer, and I am giving my time freely to the Kannapolis Parks and Recreation Department. I also give my permission to use any photographs taken of me for marketing or other purposes.

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I certify that the above statements are true, correct, and given voluntarily. In addition, I understand that this information may be disclosed to any party with legal and proper interest.

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**Date**

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**Signature of Volunteer Applicant**

**Parental Consent for Minor to Volunteer**

In consideration of the City of Kannapolis, permitting my child to participate as a volunteer in the Parks and Recreation Department and its associated activities, I acknowledge and agree to the following: (1) I represent that my child is in satisfactory physical and mental health and physically/mentally able to engage in volunteer work and not be a danger to themselves or others. (2) I am aware that as a parent of a minor that I will be held liable for any misconduct or behavior or unlawful activity that my child may engage in while in a volunteer status with the City of Kannapolis.

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**Date**

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**Signature of Parent/Guardian (if under 18)**