

# Coeur d'Alene Carousel Foundation Volunteer Application and Agreement Form

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Company or Volunteer Group Name (if applicable) : \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Driver License Number. \_\_\_\_\_ State: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_  
(Name) (Relationship) (Contact phone #)

Do you have any friends/family members who are employed or volunteer here? \_\_\_\_Yes \_\_\_\_No

Types of volunteer work you think you'd be most comfortable with (check as many as apply):

\_\_\_\_ Ambassador \_\_\_\_ Special Events \_\_\_\_ Ride Operator (must be 18 years of age) \_\_\_\_ Other

**BACKGROUND CHECK:** Carousel of Dreams and its entities require all volunteers and employees submit to a background check. No employee, agent or volunteer who has been convicted of a violent crime or crime of moral turpitude shall assist or participate in any manner with the Carousel operations or maintenance. Violent crimes include, but are not limited to, homicide, rape, child molestation, felony assault, robbery, kidnapping, stalking, assault domestic violence, or assault with sexual motivation. Details of the offense will be taken into consideration before a decision is made. There is no fee on the part of the volunteer for the background check. Screening must be completed before volunteers begin working with consumers.

**I agree to a background check. Signature: \_\_\_\_\_ Date: \_\_\_\_\_**

As a volunteer or employee for Coeur d'Alene Carousel Foundation, I agree to abide by all applicable rules and regulations of the agency and Idaho State law. I may terminate this agreement at any time without prior notice for any reason. I certify that my answers on this application are true and complete and that I have not knowingly withheld any information that might, if disclosed, affect my application unfavorably. I understand that any misrepresentation or omission of facts on this application could be cause for rejection of this application or dismissal. I understand my application will be reviewed and my eligibility for volunteer work will be determined. I agree to an interview with the on-site manager and on site orientation to perform my volunteer role.

I hereby Release and Waive liability against Coeur d'Alene Carousel Foundation, a non-profit corporation, its directors, officers, employees and agents, its successors and assigns, for any injuries or illness that I myself or my dependent may suffer in connection with any volunteer work for Coeur d'Alene Carousel Foundation. Further, I agree that Coeur d'Alene Carousel Foundation is not liable for any damage to my property or my dependent's property resulting from volunteer work for them. I agree that this release is as broad and inclusive as permitted by the laws of the State of Idaho.

**Volunteer Signature: \_\_\_\_\_ Date: \_\_\_\_\_**