



# GREEN COVE SPRINGS POLICE DEPARTMENT



## Volunteer Registration

Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ Telephone: \_\_\_\_\_  
 Social Security #: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
 Driver's License #: \_\_\_\_\_

### Security Information:

1. Have you ever been convicted of a felony or other serious crime? Yes \_\_\_ No \_\_\_
2. Have you ever been convicted of a misdemeanor? Yes \_\_\_ No \_\_\_
3. Are you presently, or have you ever been charged with a crime? Yes \_\_\_ No \_\_\_

**If you answered "Yes" on #1, #2, or #3, please explain:**

\_\_\_\_\_  
 \_\_\_\_\_

4. Do you consent to a criminal background check on yourself? Yes \_\_\_ No \_\_\_
5. Length of residency in Florida \_\_\_\_\_ Former resident state \_\_\_\_\_

### Statement of Volunteer Service:

*I am volunteering my services to the City of Green Cove Springs, I understand that (1) during my time serving as a volunteer, I am not employed by the City of Green Cove Springs or the Police Department; (2) as a volunteer, I am not receiving unemployment compensation benefits; (3) I do not expect nor do I desire any wages or compensation for the services for which I am volunteering; (4) I have no expectations for employment with the City of Green Cove Springs or the Police Department; (5) I am aware that random background checks of volunteers may be made. (6)*

*As a volunteer, I agree to abide by the rules, regulations, policies, and laws of the State of Florida and the City of Green Cove Springs. I agree that the statements constitute the terms under which I am providing volunteer services; I hereby agree to those terms; and there are no understandings to the contrary.*

### Waiver of Liability/Hold Harmless Agreement:

*By my signature to this form, I understand and agree to waive any liability which the City may have to me and hold harmless and indemnify the City of Green Cove Springs and its Officers, agents and employees from any claims, suits, actions or causes of actions arising out of my participation as a volunteer. This includes but is not limited to the costs and reasonable attorney's fees associated with any claims, suits, actions or causes of action. I further understand that the City does not maintain any insurance policy covering any circumstances arising from my participation as a volunteer.*

Volunteer Signature \_\_\_\_\_ Date \_\_\_\_\_

**(Falsification of this application will result in termination of your status as a volunteer)**



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## Volunteer Registration Cont.

### **Parent or Guardian's Waiver of Liability/Hold Harmless Agreement:**

*By my signature to this form, I understand and agree to waive any liability which the City may have to me and hold harmless and indemnify the City of Green Cove Springs and its officers, agents and employees from any claims, suits, actions or causes of actions arising out of my son's or daughter's participation as a volunteer. This includes but is not limited to the costs and reasonable attorney's fees associated with any claims, suits, actions or causes of action. I have adequate insurance to cover my son or daughter in case of accident or injury.*

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_  
Print Name

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

City: \_\_\_\_\_

Phone #: \_\_\_\_\_

Witness: \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_  
Print Name

### **For Official Use Only:**

Date Checked Through NCIC/FCIC: \_\_\_\_\_ Check by: \_\_\_\_\_

Approved by: \_\_\_\_\_