DIOCESE OF OAKLAND – CATHOLIC YOUTH ORGANIZATION VOLUNTEER APPLICATION

PLEASE PRINT LEGIBLY OR TYPE. DO NOT LEAVE ANY BLANKS

Last Name			First Name			Middle Name		
Street Address		City / Zip Code						
Home Phone	Work Phone		Cell Pho		ne	Email		
Other Contact Number			Date of Birth (M/D/Yr)		Parish			
DRIVERS LICENSE INFO	ORM <i>A</i>	ATION-Bed	cause you m	ay be driv	ving minors to ever	nts, please pro	ovide the following information.	
tate Lic		License	License Number		Class		Expiration Date	
Insurance Carrier	Policy Nu		umber		Amt of Liability Coverage		Amt of Medical Coverage	
of a valid, unrestricted dri	vers li issenç	cense; pro gers must	oduce evider wear a seat	nce of mir belt and i	nimum liability insur no more than nine	rance coveraç	ly over 25); provide evidence ge of \$100,000 per person, be transported in one vehicle.	
From:			Title:			Employer:		
Through:			Duties:			Address: Phone:		
From:	From:		Title:			Employer:		
Thursday		Duties:				Address:		
Through:					Phone:			
REFERENCES Please	list tw	o referenc	ces who can	attest to	our work with you	ng people. E	xclude employers and relatives	
Name						Phone Numbers		
Address						Home		
City, State, Zip						Work		
Name						Phone Numbers		
Address						Home		
City, State, Zip						Work		

 CONVICTIONS - Conviction of a crime is not necessarily a bar to volunteer employment. Each case is considered separately. Conviction of a sexual crime will bar you from volunteering in youth programs in the diocese. 1. Have you ever been convicted by any court of a criminal offense? ☐ Yes ☐ No Omit: Minor traffic violations; Any offense committed prior to your 18th birthday which was finally adjudicated in a juvenile court or under a youth offender law; Any incident sealed under Welfare & Health Institutions Code #781 or Penal Code #1203.45. 2. Have you ever abused or been convicted of having abused a child, sexually or otherwise? ☐ Yes ☐ No
If the answer to 1 or 2. is "Yes," state what offense, when, where, and disposition of case:
CENEDAL INFORMATION
GENERAL INFORMATION Have you coached CYO Sports before?If yes, list sports, dates, grades and parishes:
Have you coached other youth sports before? If yes, list sports, dates, grades and organizations
Have you worked with youth previously in programs other than sports? If yes,list
Are you certified in Red Cross First Aid?CPR?
Have you ever been disciplined or removed by another parish progam, or by any other youth-serving organization?If yes, please detail:
Please state why you wish to volunteer:
CERTIFICATION AND SIGNATURE As a condition of volunteering, I give permission to conduct a background check on me, which may include a review of criminal and child abuse records maintained by governmental agencies. I understand that, if appointed, my position is conditional upon receiving no inappropriate information on my background. I hereby release and agreed to hold harmless from liability, the officers, employees and volunteers thereof, or any other person or organization that may provide such information. I also understand that, regardless of previous appointments, CYO is not obligated to appoint me to a volunteer position, If appointed, I understand that, prior to the expiration of my term, I am subject to suspension and/or removal for violation of its policies or principles. In consideration of participating in the Oakland Diocese CYO program. I represent that I understand the nature of this Activity and that I am qualified, in good health, and in proper physical condition to participate in such Activity. I acknowledge that ifl believe event conditions are unsafe, I will immediately discontinue participation in the activity.
I fully understand that this Activity involves risks of serious bodily injury, including permanent disability, paralysis and death, which may be caused by my own actions or inactions, those of others participating in the event, the conditions in which the event takes place, or the negligence of the "Releasees" named below, and that there may be other risks either not known to me or not readily foreseeable at this time; and I fully accept and assume all such risks and all responsibility for losses, costs, and damages I incur as a result of my participation in the Activity.
I hereby release, discharge, and covenant not sue: The Roman Catholic Bishop of Oakland, a Corporation Sole, and the Roman Catholic Welfare Corporation of Oakland, its respective administrators, directors, agents, officers, volunteers and employees, other participants, (each considered one of the "RELEASEES" herein) from all liability, claims, demands, losses or damages on my account caused or alleged to be caused in whole or in part by the negligence of the "releasees" or otherwise, including negligent rescue operations; and I further agree that if, despite this release, waiver of liability, and assumption of risk I, or anyone on my behalf, makes a claim against any of the Releasees, I will indemnify, save and hold harmless each of the Releasees from any loss, liability, damage, or cost, if any, which may incur as the result of such claim.
I have read this RELEASE AND W AIYER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT, and understand that I have given up substantial rights by signing it and have signed it freely and without any inducement or assurance of any nature and intent it be a complete and unconditional release of all liability to the greatest extent allowed by law and agree that if any portion of this agreement is held to be invalid the balance, notwithstanding, shall continue in full force and effect.
DexteSignature