



# SANCA Volunteer Application 2020-2021

**Please print**

First Name..... Last Name.....

Address City/State/Zip.....

Telephone.....Email Address.....

**Personal Information (please circle correct response):** Gender: Male Female

**Shirt size:** S M L XL 2XL 3XL

**Additional language skills:** Spanish French German Italian Russian

Chinese Japanese Polish Arabic Portuguese Other:\_\_\_\_\_

**Physical Limitations:** No Yes (Please Explain)

**What activities are you most interested in assisting with? (Circle all applicable)**

Parking Hospitality Athlete Support Launch boat driving golf cart driving

Stakeboat holding Check-in Crowd Control Refereeing

**Volunteer availability: (Circle all applicable)**

Number of Days per week: 1 2 3 4 5

Monday Tuesday Wednesday Thursday Friday Saturday Sunday

**In an emergency, notify:**

Name: .....

Address City/State/Zip.....

Telephone..... Relationship: .....

I hereby agree to serve SANCA who is assigned regardless of race, sex, creed or national origin.

.....

(Signature/Volunteer)

(Signature/SANCA Approval)

(Date)



## SANCA Volunteer Liability Waiver, Florida Statute Compliance, Photo Release

**LIABILITY WAIVER:** I acknowledge that my participation is completely voluntary and is being undertaken without promise or expectation of compensation. I, the undersigned, for myself, my heirs, and assigns hereby release and discharge Sarasota County Parks and Recreation Department, Sarasota County Government, Suncoast Aquatic Nature Center Associates (SANCA) and agents, and any participating organizations for any claims or damages of injury I may incur for my participation in this voluntary community event. I understand that my involvement involves a risk of injury and that illness may result from my participation. I further state that I am in proper condition for participating in this event. I can be released from my voluntary participation in the aforementioned activities for any reason or no reason at all without notice; and I am not entitled to any recourse in the event I am released. I hereby give my permission for SANCA to use any still photograph or video footage in which I may appear for whatever purpose(s) deemed appropriate and this is done voluntarily and with the understanding there is no remuneration for my time or services rendered.

**FLORIDA STATUTE COMPLIANCE:** I acknowledge that my participation will subject me to compliance requirements under 2004 FLORIDA STATUTES; TITLE XLVII; Chapter 943.043. This statute allows governing authorities to conduct background checks for criminal information maintained by the Florida Department of Law Enforcement. Non-disclosure of prior conviction(s) could result in criminal prosecution.

**PHOTO RELEASE:** I also give my permission to Sarasota County, SANCA, and any other agencies and/or companies to reproduce any photographs or video taken during the event.

**BY SIGNING THIS DOCUMENT I ACKNOWLEDGE THAT I HAVE READ THE TEXT OF THE LIABILITY WAIVER, FLORIDA STATUTE COMPLIANCE, AND PHOTO RELEASE, AND AGREE TO ALL TERMS SET FORTH HEREIN.**

**(PLEASE PRINT & WRITE LEGIBLY)**

First Name..... Last Name.....

Address.....

City/State/Zip.....

County of Residence.....

Telephone.....

Date of Birth.....

**ALL MINORS UNDER 18 YEARS OF AGE WILL NEED TO PROVIDE PARENTAL CONSENT UPON ACCEPTANCE.**

**VOLUNTEER/PARENTAL SIGNATURE** \_\_\_\_\_

**FDLE** \_\_\_\_\_ **(Date)**