Baltimore City
Recreation and Parks
Volunteer Program
Policies and Procedures
Manual
# TABLE OF CONTENTS

Welcome .................................................................................................................3
Mission Statement ..................................................................................................4
The Department at a Glance ..................................................................................5
Volunteer Opportunities and Information ............................................................6-12
  Volunteer Opportunities .......................................................................................6-8
  Volunteer Information ..........................................................................................8-12
    Age .......................................................................................................................8
    Attendance ............................................................................................................8
    Benefits ................................................................................................................8
    Conduct ...............................................................................................................8-9
    Criminal Background Information ...................................................................9
    Dismissal/ Suspension .........................................................................................9
    Drugs and Alcohol ..............................................................................................9
    Income Taxes .......................................................................................................9
    Paperwork ..........................................................................................................9
    Reference Checks ...............................................................................................10-11
    Weather Emergency Plan ..................................................................................11-12
Safety ...................................................................................................................12-14
  General Safety .....................................................................................................12
  Supervision ..........................................................................................................12
  Workplace Harassment .........................................................................................12-13
  Liability .................................................................................................................13
  Safety Guidelines ..................................................................................................13
  Safety Procedures ................................................................................................13
  Rules of Safety .......................................................................................................14
Emergency Policies and Numbers ..........................................................................14
Accidents and Medical Emergencies .....................................................................14-15
Inclement Weather Policy ......................................................................................15-16
Participants Rule of Conduct ................................................................................16
  Dress Code ..........................................................................................................16
  Child Abuse .........................................................................................................16-17
Blood Borne Pathogens ..........................................................................................18
Forms ....................................................................................................................19
Volunteer Procedure ...............................................................................................20
Volunteer Application with Waiver .......................................................................21-25
Report Forms .........................................................................................................26-29
Volunteer Contact Information Form ....................................................................28
Dear Volunteer:

I would like to welcome you to the volunteer program of the Department of Recreation and Parks. We have many committed volunteers in a diverse and beneficial way so that your participation will increase the quality of our program offerings and facilities. Baltimore City Recreation and Parks is able to provide a wide variety of volunteer opportunities that benefit our facilities and parks. Volunteer opportunities increase the ability and variety of opportunities for all city residents and visitors to Baltimore. With your dedication to our valuable facilities and parks we can improve the quality of life in Baltimore. The volunteer program plays a major role in the Recreation and Parks operation. The Department of Recreation and Parks and its staff are eager to begin working with you. I would like to sincerely thank you for your generous donation of your time and experience.

By reading this manual, you will become knowledgeable of the Department of Recreation and Parks system and hopefully the manual will answer most of the questions you may have concerning our department.

Again, I would like to thank you for volunteering your valuable time and experience to add to the rich and diverse City of Baltimore.

Sincerely,

Ernest Burkeen Jr.
Director
MISSION STATEMENT

Department Mission

The mission of Recreation and Parks is to improve the health and wellness of Baltimore through quality recreational programs, preserving our parks and natural resources, and promoting fun, active lifestyles for all ages.

Vision for Volunteers

To increase the number of parks and recreation centers that have volunteers actively caring for the park and park facilities and providing community programs and events, and in turn, increase the level of physical activity, enjoyment and stewardship occurring in our Baltimore communities. Because volunteers often live in the neighborhood surrounding the park or center, they have a greater capacity for maintaining parks and facilities. They also understand the community need in relation to the park and its amenities.

- Provide innovative customer driven leisure programming that is responsive to changes in the community.
- Promote and support active community participation in the decision making and problem solving processes to assist in the preservation of neighborhoods and surrounding natural resources.
- Create a recreation and park system that is an integral part of the city’s image and unique personality.
THE DEPARTMENT AT A GLANCE

Baltimore City Recreation and Parks (BCRP) was founded in 1865. The agency provides recreational services for the citizens of Baltimore and maintains over 4,600 acres of city owned park land. BCRP provides diverse recreational services, ranging from neighborhood recreation centers and summer camps to youth and adult sports to outdoor recreation, aquatics, therapeutics, one of the nation’s best boxing programs, and Maryland’s best seniors programs. The city owned park land, much of it consisting of stream valleys, ranges in size and type from a 900 acre urban wilderness park to .25 acre green community play lots and playgrounds.

Parks play an integral part in the health and well-being of urban citizens. The Baltimore City Health Department began neighborhood health assessments and in 2011, the Healthy Baltimore 2015 initiative was introduced. Through the assessment, it was determined that cardio-vascular disease is the leading cause of death in the city and that lack of physical activity was a primary contributor. BCRP works to address these health issues through diverse recreational services and a wide variety of park land throughout the city.
VOLUNTEER OPPORTUNITIES AND INFORMATION

Our department offers a variety of volunteer positions. You can choose from a one day special event such as Eco Fest, to an on-going program such as the Upton Boxing Center. Opportunities are available working with pre-school children up to senior adults. Below are examples of volunteer opportunities available with our department:

Administration:
- Office Assistant
- Photographer
- Data Entry

Aquatics:
- Junior Lifeguard
- WSI Aide
- Swim League Scorers and Timers

Youth and Adult Sports:
- Sports Coordinator
- Coach
- Assistant Coach

Outdoor Recreation Programs:
- Outdoor Program Assistant
- Bike Programs and Mechanics
- Hiking/Walk Guides
- Kayak/Canoe Trip Assistant (experience required)

Recreation Centers:
- Coach
- Recreation Assistant
- Specialty Class Instructors (Dance, Boxing, Knitting, etc)

Special Events:
- Special Event Assistant
- Marketing and Graphic Arts

Stewardship Programs:
- Adopt-A-Programs
• Partnership for Parks
• Sponsorships
• Donations

**Howard P. Rawlings Conservatory and Cylburn Arboretum:**
• Educational Programs
• Garden Hands
• Front Desk
• Tours

**Parks and Natural Areas:**
• Park Aide
• Gwynns Falls Trail Maintenance
• Jones Falls Trail Maintenance
• Herring Run Trail Maintenance
• Playground Crew
• Invasive Plant Removal
• Environmental Education
• Naturalist in Every Neighborhood
• Friends of the Parks Groups

**TreeBaltimore:**
• Plant a Street Tree
• Plant a Park Tree
• Tree Giveaways

**Therapeutic Recreation:**
• Activity Assistant
• Camp Counselor Aide

**Senior Citizens Recreation:**
• Activity Center Assistant Leader
• Trip Assistant
• Maryland Senior Olympics

**Earth Week:**
• Earth Day Volunteer
• Baltimore Green Week Events, Workshops, and Seminars
• Arbor Day Volunteer

VOLUNTEER INFORMATION

As a volunteer with our department, you will be provided with a written position description for each position or assignment. This position description will provide the duties and requirements for the position qualifications, time commitment and required training. Please do not begin any volunteer assignment until you have received this information.

Age

Volunteers not working with children must be at least 14 years of age. Volunteers working with children must be at least 16 years of age. Those under the age of 18 must be supervised by an adult.

Attendance

Our office hours are 8 a.m. – 5 p.m., Monday – Friday. In the event of sickness or a schedule change that prohibits your attendance at a scheduled assignment, please contact the direct supervisor of the program. Give as much notice as possible; in most cases a substitute must be found.

Benefits

You may receive certain benefits, such as personal references, training and recognition. Other benefits are more personal and include the satisfaction of sharing your time and talent with others, making new friends, learning new skills and experiencing personal growth.

Conduct

As a Baltimore City Department of Recreation and Parks volunteer, the lasting impression you make on those you serve reflects directly on all of us. Please be sure your words and deeds will help build our department and its reputation for quality. Your assignments may be outdoors, in an office or a school setting. Be sure your attire and actions are appropriate to your assignment and workplace. In dealing with Baltimore City citizens and program participants, you must be unfailingly polite and mannerly. It is not your role or responsibility to handle unhappy participants. Should you find yourself in a situation where courtesy is becoming difficult, please refer the matter 10 to the nearest responsible Recreation and Parks employee. Baltimore City complies with all laws about
race, creed and religion. Just remember, in your interactions with others, to treat them as you would want to be treated.

**Criminal Background Information**

It is the policy of Baltimore City Department of Recreation and Parks that all volunteers completing direct service, with the exception of one-time park volunteers, must undergo a background check. Direct service is defined as leading activity programs, providing instruction, supporting special events, leading trips and tours, facilitating the involvement of participants with disabilities and coaching youth sports for more than three consecutive days. A background check may require that a volunteer be fingerprinted or undergo a social security/criminal screening check. A satisfactory background check result is required before the volunteer can begin the assignment.

**Dismissal/Suspension**

Volunteers serve at the pleasure of the Appointing Authority or the Department/Agency (or their designee) and may be dismissed from volunteer duties at any time, with or without cause. A volunteer may not be selected for volunteer service. This determination may be made with or without cause.

**Drugs and Alcohol**

The City is committed to maintaining a work environment free of the taint of substance abuse, and requires all volunteers to not report to their work site while under the influence of drugs or alcohol. All volunteer should not purchase or consume alcohol while on-duty or in any attire which displays an insignia of the City. Any such behavior will result in immediate removal from a volunteer position. If you observe another volunteer doing so, you should report this immediately to the Volunteer Coordinator.

**Income Taxes**

As a volunteer, you are eligible to claim your volunteer mileage to and from your volunteer site at the rate stated in the current tax law.

**Paperwork**

Certain paperwork is required to be on file with our department (for all volunteers, except one-time park volunteers). For example:

- **Application Form**: Must be completed for each new volunteer.
- **Background Check**: Must be completed before starting the volunteer position.
o **Agreement Form:** This form must be read and signed by all volunteers at the time of their background check and after reading this policy and procedure manual.

o **Monthly Volunteer Report:** A record of volunteer hours (sign-in sheet) must be completed. The Center Director will forward this information to the Volunteer Coordinator every month.

o **Evaluation:** At the conclusion of your volunteer assignment, an evaluation may be sent to you for completion. This provides us with information on your volunteer experience and will allow us to continue to improve our programs and services.

**Reference Checks**

Volunteer applicants must submit one personal and one professional reference as noted on the volunteer application. We reserve the right to check references before allowing volunteers to work in programs.

**Steps for Recruiting Volunteer for Recreation Centers, Special Facilities, and Ongoing Programs (Sports Coaches, Aquatics, etc.)**

1. **Volunteer Application:** Every volunteer must complete a volunteer application, which can be found on the BCRP website or an electronic copy can be emailed or delivered to your center. Email bcrp.volunteers@baltimorecity.gov to request an application.

2. **Interview:** Every volunteer must go through an interview process with the Director of the Center or Program they will serve in order to receive the appropriate information about the volunteer position, the center or program as well as be approved by the Director as a good fit for the position. The Director will sign the volunteer application which serves as their approval.

3. **Background Check and Fingerprinting:** Any volunteer 16 years of age or older must go to the Ralph W. E. Jones Administration Building (3001 East Dr, Baltimore, MD 21217) for a background check and fingerprinting.

4. **Fingerprinting Proof Document:** After completing the fingerprinting process, the individual will receive a document of proof for the completion. This document must be taken back to the center and given to the director before beginning any volunteer work.
5. **Orientation:** The volunteer should be given an orientation to the job by the Center or Program Director. This orientation should include information about the department as well as information about operations that would make the volunteer experience successful.

6. **Volunteer Follow Up:** If there are any issues with the fingerprinting and the background check then the Center or Program Director will be notified by the Human Resources department about the next steps.

7. **Volunteers should sign in every day at the center or program and record their hours.** A sign in sheet should be provided by the Center or Program Director.

**National Weather Emergency Plan**

If thunder and/or lightning can be heard and/or seen, stop activity and seek protective shelter immediately.

In situations where thunder and/or lightning may or may not be present yet you feel your hair stand on end and skin tingle, immediately assume the following crouched position: Drop to your knees, place your hands/arms on your legs and lower your head. Do not lie flat.

In the event that either situation should occur, allow 30 minutes to pass after the last sound of thunder and/or lightning strike prior to resuming play.

The National Weather Service has stated that lightning can strike up to a distance of 10 miles, with storms traveling at a speed exceeding 50 miles per hour. However, thunder can be heard only 12 within a distance of 8 miles. Therefore, if you hear thunder and/or see lightning, you are in immediate danger and should seek protective shelter in an indoor facility at once! An indoor facility is recommended as the safest protective shelter. However, if an indoor facility is not available, the following guidelines are recommended. Avoid standing under large trees and telephone poles. If the only alternative is a tree, chose a small tree in a wooded area that is not on hill. As a last alternative, find a ravine or valley. In all instances outdoors, assume the aforementioned crouched position. Avoid standing water and metal objects at all times (i.e., steering wheel, metal bleachers, metal cleats, umbrella, etc.).
The National Weather Service recommends that 30 minutes should pass after the last sound of thunder is heard and/or lightning strike is seen before resuming play. This is sufficient time to allow the storm to pass and move out of lightning strike range.

**iNWS:** A free service by the National Weather Service that delivers immediate messages to you via text and email. Sign-up and create a customized profile at http://inws.wrh.noaa.gov

## SAFETY

**General Safety**

Working conditions will be the same for volunteers as for staff. Our department will do its best to provide safe conditions and safety directions necessary to complete your assignment. In your position description, you will be informed of any attire and equipment required for your assignment. Always be aware of where you are and what you are doing and the person, if any, next to you. We count on you to be the best protector of your personal safety. Please let your supervisor or the Volunteer Coordinator know of any safety concerns that you may have. In this handbook, there are additional safety guidelines to follow when volunteering in a program with participants.

**Supervision**

Volunteers must check in with the supervisor or program leader at the beginning of the program so that supervisors can keep a record of volunteer time and offer appropriate supervision.

**Workplace Harassment**

The City is committed to maintaining a work environment in which all individuals are treated with respect and dignity. Volunteers have the right to work in an atmosphere which promotes equal opportunities and prohibits discriminatory practices, including harassment. Harassment, whether verbal, physical, non-verbal, or visual, arising in City owned facilities, at work assignments outside City owned facilities, or at City sponsored or endorsed functions, including social functions, is unacceptable and will not be tolerated. Such harassment is also illegal. Normal, courteous, mutually respectful, non-coercive interaction acceptable to and welcomed by both parties, however, is not considered harassment under the terms of the City policy.
The City encourages volunteers to promptly report all information concerning workplace harassment without regard to the identity of the harasser or victim. The City is committed to the prompt investigation of all complaints of harassment and prompt and effective remedial action to stop such conduct from occurring.

Liability

Liability protection with respect to damages to third parties is available to you to the same extent as City employees under State Law (as long as you are acting within the scope of your duties as a volunteer.) Baltimore City assumes no liability for personal injury or damage to personal property unless caused by the sole negligence of the city.

Safety Guidelines

The following guidelines are not all-inclusive; you must constantly work at insuring the safety of all participants.

- **SURVEY** your area/site to look for potential hazards, dangerous situations, or equipment in need of repair.
- **ALWAYS** think “safety first” when planning any event, trip or activity.
- **FIRST** aid guidelines and procedures should be reviewed frequently with all staff and children. Everyone should know his/her role in the event of an emergency.
- **EMPHASIZE** rules and procedures with all children on a daily basis. Good communication is essential to a safe situation.
- **TRAVEL** carefully. Activities that involve leaving your site (walking or by bus) should be carried out with utmost care and consideration of all details.
- **YOU** must deal with safety problems immediately. If the problem is one you cannot take care of personally, report it as soon as possible to your supervisor.

Safety Procedures

Making recreation facilities and programs as safe as possible is a primary responsibility of every leader. The preventive measure is the establishment of sound discipline at the beginning of your program. Strict enforcement of rules and regulations is essential.
Rules of Safety:

- Organize and lead activities which suit the ability of the participants, as well as the facility area.
- Provide adequate supervision for all activities at all times.
- Restrict activities to assigned areas.
- Use only facilities and equipment which has been previously checked and cleared of hazards.
- Know the proper use of all equipment.
- “Spot” participants if the activity is new to them.
- Try to anticipate and avoid any dangerous situations before beginning your program.

EMERGENCY POLICIES AND NUMBERS

1. In an emergency: Dial 911 (from 396 extensions, dial 9 + 911)\n
2. Without delay, contact your immediate supervisor.

3. If you are unable to reach your immediate supervisor, contact the following people in the order listed until you reach someone:
   - Mary Hardcastle, Volunteer Coordinator 410-396-7020
   - Fran Spero, Chief, Partnerships and Special Events 410-396-7012
   - William Vondrasek, Deputy Director 410-396-5918

ACCIDENTS AND MEDICAL EMERGENCIES

If you are in doubt as to the seriousness of an injury, DO NOT move the injured person. Call 911 or (9+911) immediately for help.

Minor Accident: Administer only necessary standard first aid as described in First Aid Procedures for Common Injuries and Accidents. Contact your immediate supervisor. Complete an Accident/Injury Report form and submit it to your recreation coordinator within 24 hours. Coaches generally administer first aid to their players; you should see that an Accident/Injury Report form is submitted in all cases.

Serious Accident: First treat breathing, serious bleeding and poisoning; then administer first aid as described in First Aid Procedures for Common Injuries and Accidents. Send a responsible person to call the ambulance (dial 911) and give proper information (name, location, access entrance, type of injury, need
for special equipment). Notify the Recreation Department as soon as possible after the accident. See Staff Chart for phone numbers. Complete an Accident/Injury Report form and submit it to the Recreation Coordinator within 24 hours of the accident. Only necessary information should be given out during an emergency. DO NOT GIVE OUT UNNECESSARY INFORMATION. Under NO circumstances should you advise anyone that the Department of Recreation and Parks will pay the bills. In case of minors, notify the child’s parents or other person listed on registration list. If the injured child (under 18) is taken to a hospital by ambulance, ask the paramedics where they are going; communicate this information to the parent as soon as possible because the child cannot be treated without parental permission unless it is a life and death emergency.

**Non-Medical Emergencies:** In the case of non-medical emergencies, call the Baltimore City Police at 911. Notify the recreation coordinator immediately. Complete an Accident/Incident Report form.

**INCLEMENT WEATHER POLICY**

The inclement weather policy is as follows:

If school is closed early due to inclement weather, the recreation centers will remain open, but programs will be considered on a case-by-case basis.

If school is closed due to inclement weather, the recreation centers will be open, but the hours of operations may be adjusted.

Volunteers are recommended to sign up for the WBAL-TV weather alerts, which can be done by visiting the following website, http://www.wbaltv.com/weather/alerts

In inclement weather, call one of the following numbers Monday-Friday after 4 p.m. (on weekends after 7 a.m.) for a recorded announcement about program changes and cancellations or for field conditions:

<table>
<thead>
<tr>
<th>Recreation Program</th>
<th>Phone Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Changes and Cancellations</td>
<td>410-396-7037</td>
</tr>
<tr>
<td>Age60+ and Therapeutic</td>
<td>410-396-1550</td>
</tr>
<tr>
<td>Special Events</td>
<td>410-396-7459</td>
</tr>
</tbody>
</table>
PARTICIPANTS RULES OF CONDUCT

The following will not be tolerated in any Recreation and Parks Program:

- Smoking in building
- Soliciting or loitering
- Food and beverage in unauthorized areas
- Interference with employee or volunteer duties
- Harassment and/or inappropriate or indecent conduct or language
- Use of illegal drugs, intoxicants, and weapons
- Parking in unauthorized areas; driving or parking in field areas
- Any other conduct that may jeopardize the safety of others
- Inappropriate dress (please see dress code section below)
- Use of cellphones, iPods, and any other electronics
- Carrying of personal belongings at all times

DRESS CODE

As a representative of Baltimore City Recreation and Parks, volunteers, like staff, are responsible for presenting a good image to the community. Volunteers shall dress appropriately for the conditions and performance of their duties. Volunteers are to be identified as such through wearing departmental issued shirts with logo, nametags, or other methods provided by Baltimore City Recreation and Parks. Volunteers are not to wear tank tops, short shorts, short skirts, sandals, suggestive or offensive clothing that contain inappropriate words or language. Depending on your volunteer position, additional clothing and/or equipment requirements may exist and will be communicated to you by your supervisor.

CHILD ABUSE

The crimes of child sexual and physical abuse are issues of great importance to the Department of Recreation and Parks and the protection of the children we serve is a high priority. Under no circumstances may a volunteer take participants on an overnight trip.
Listen to children who complain to you about another child “bothering them” or touching them. Determine the nature of this contact and report suspicious or irregular behavior to the program coordinator. If you feel a child has been a victim of sexual or physical abuse at the site or elsewhere, including their home, it is recommended that you first contact your program coordinator or supervisor. However, any suspicions of child abuse may be reported directly by staff to Child Protective Services on (410) 361-2235.

Guidelines for Volunteers

Behavior concerning child abuse, sexual abuse, physical abuse and neglect:
- Children are not permitted to sit in any leader’s or volunteer’s lap.
- Carrying a child is not permitted, except in an emergency.
- Inappropriate displays of affection are not allowed.
- Touching of personal/private areas is not allowed.
- Verbal comments/teasing is prohibited.
- No abusive or cruel language should ever be used.
- Forcing children into seats, shaking, grabbing and/or corporal punishment can be considered abusive.
- When assisting children to the bathroom, the volunteer must stay just outside of the bathroom and wait for the children to be finished.
- On field trips, a volunteer of the same sex may assist the children to the bathroom and stand inside of the bathroom to ensure the children are behaving appropriately; however, the volunteer must not enter the stall with the child.

NEVER PUT YOURSELF INTO A SITUATION WHERE YOUR BEHAVIOR COULD BE QUESTIONED.
**BLOOD BORNE PATHOGENS**

When cleaning up blood or other body fluids after an accident, specific care and procedures must be followed at all times!

When any individual, whether an employee, participant in a City program or a member of the public has received treatment for an injury or been transported to a doctor or hospital, the job of protecting yourself and others from infectious blood borne diseases has just begun. A hazardous condition still exists until the following has been done:

- Blood or other body fluids must be removed from the area. The use of a spill solidifier can be used on liquids, such as blood, urine or vomit. Approximately one ounce of solidifier will treat approximately one quart of liquid. This product turns the liquid into a gel, which can then be scraped up and placed in a red “biohazard bag.” The area can be sanitized with a mixture of bleach and water. Use one part bleach to ten parts water. The use of germicidal cleaner with a deodorizer is an alternative method of cleaning up the area.

- Equipment surfaces (counter tops, desks, etc.) or other cleanable non-porous materials that have been contaminated also require cleaning and disinfecting. Follow the sanitizing procedure described above.

- Contaminated clothing must be removed, placed in a “biohazard bag” and washed separately with laundry soap and a disinfectant cleaner. Any blood or other body fluids must be thoroughly washed off skin surfaces.

- Mops, buckets or other cleaning utensils must be thoroughly cleaned and disinfected after being used to clean up blood or other body fluids.
FORMS
Steps for Recruiting Volunteers - Recreation Centers, Special Facilities, and Ongoing Programs (Sports Coaches, Aquatics, etc.)

1. **Volunteer Application**: Every volunteer must complete a volunteer application, which can be found on the BCRP website under Volunteer Tab or an electronic copy can be emailed or delivered to your center. Email bcrp.volunteers@baltimorecity.gov to request an application.

2. **Interview**: Every volunteer must go through an interview process with the Director of the Center or Program they will serve in order to receive the appropriate information about the volunteer position, the center or program as well as be approved by the Director as a good fit for the position. The Director will sign the volunteer application which serves as their approval.

3. **Background Check and Fingerprinting**: Any volunteer 16 years of age or older must go to the Ralph W. E. Jones Administration Building (3001 East Dr, Baltimore, MD 21217) for a background check and fingerprinting.

4. **Fingerprinting Proof Document**: After completing the fingerprinting process, the individual will receive a document of proof for the completion. This document must be taken back to the center and given to the director before beginning any volunteer work.

5. **Orientation**: The volunteer should be given an orientation to the job by the Center or Program Director. This orientation should include information about the department as well as information about operations that would make the volunteer experience successful.

6. **Volunteer Follow Up**: If there are any issues with the fingerprinting and the background check then the Center or Program Director will be notified by the Human Resources department about the next steps.

7. **Volunteers should sign in every day at the center or program and record their hours**: A sign in sheet should be provided by the Center or Program Director.
<table>
<thead>
<tr>
<th>Contact Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name:</td>
</tr>
<tr>
<td>Street Address:</td>
</tr>
<tr>
<td>City ST ZIP Code:</td>
</tr>
<tr>
<td>Home Phone:</td>
</tr>
<tr>
<td>Company You Work For:</td>
</tr>
<tr>
<td>Work Phone:</td>
</tr>
<tr>
<td>E-Mail Address:</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Availability</th>
</tr>
</thead>
<tbody>
<tr>
<td>During which hours are you available for volunteer assignments?</td>
</tr>
<tr>
<td>___ Weekday mornings</td>
</tr>
<tr>
<td>___ Weekday afternoons</td>
</tr>
<tr>
<td>___ Weekday evenings</td>
</tr>
<tr>
<td>___ Weekend mornings</td>
</tr>
<tr>
<td>___ Weekend afternoons</td>
</tr>
<tr>
<td>___ Weekend evenings</td>
</tr>
<tr>
<td>What hours would you like to work?  FROM_______ (AM / PM) TO _____ (AM / PM)</td>
</tr>
<tr>
<td>What days of the week would you like to work?</td>
</tr>
<tr>
<td>___Monday ___Tuesday ___Wednesday</td>
</tr>
<tr>
<td>___Thursday ___Friday ___Saturday</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Interests</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tell us in which areas you are interested in volunteering (you can check more than one):</td>
</tr>
<tr>
<td>___ Recreation Centers  Which recreation center(s)?</td>
</tr>
<tr>
<td>___ Aquatics           Which location?</td>
</tr>
<tr>
<td>___ Special Events     Where?</td>
</tr>
<tr>
<td>___ Sports             Which special events interest you?</td>
</tr>
<tr>
<td>___ Parks / park cleanups  Which sports?</td>
</tr>
<tr>
<td>___ Tree Plantings     Which park?</td>
</tr>
<tr>
<td>___ Howard P. Rawlings Conservatory Where?</td>
</tr>
<tr>
<td>___ Cylburn Arboretum Which park(s)?</td>
</tr>
<tr>
<td>___ Youth Development</td>
</tr>
</tbody>
</table>

Appointments for Recreation Center volunteers only: 410-396-7605 (Human Resources Division), 3001 East Drive (Druid Hill Park), Mon.-Fri. 9:00 a.m. - 4:00 p.m. You must call the Human Resources Office for an appointment prior to visiting the office. The last appointment of the day will be at 4:00 p.m. YOU MUST BRING A VALID ID (MD STATE DRIVERS LICENSE OR MD ID CARD OR A SCHOOL ID ARE ACCEPTABLE)!
___ Parent Advisory Council
___ Mentoring youth  Are you a parent of a Center youth?  ____ Yes  ____ No
___ Helping people with disabilities
___ Senior Citizens
___ Fundraising
___ Tutoring/Homework assistance  Area of expertise?
___ Computers  Subject matter expertise?
___ Field trips  Area of expertise?
___ Horticulture/gardening
___ Marketing/publications
___ Volunteer coordination
___ Special facility/soccer arena
___ Other  Which facility would you like to serve?

Special Skills or Qualifications
Summarize special skills and qualifications you have acquired from employment, previous volunteer work, or through other activities, including hobbies or sports. Attach an additional sheet if necessary.

Previous Volunteer Experience
Summarize your previous volunteer experience.

Person to Notify in Case of Emergency

Name:

Relationship to You:

Street Address:

City ST ZIP Code:

Home Phone:

Work Phone:

E-Mail Address:
Cell phone:  

Do you have any health issues or medications that we should know about in an emergency?  
Yes_____              No_____  
If yes, please identify issues and medications  
________________________________________________________________________________

**Background Information**

Have you ever been convicted of a felony?  
___Yes  ___No  
To ensure the safety of our children, the Department of Recreation and Parks requires that all volunteers and staff who work directly with youth must be fingerprinted and undergo a background check with the Maryland State Police.  

Do you consent to do this?  
___Yes  ___No

**Agreement and Signatures**

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as a volunteer, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal.

<table>
<thead>
<tr>
<th>Volunteer Name (printed)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Birth Date</td>
</tr>
<tr>
<td>Signature</td>
</tr>
<tr>
<td>Today’s Date</td>
</tr>
<tr>
<td>Parent Signature if Junior Volunteer (age 14 or under)</td>
</tr>
</tbody>
</table>

**References**

One personal and one professional reference are required in order to be considered for a volunteer position with Baltimore City Recreation and Parks.

| Name: |  
| Relationship: |  
| Phone Number: |  
| Email Address: |  

| Name: |  
| Relationship: |  
| Phone Number: |  
| Email Address: |  

23
Our Policy

It is the policy of this organization to provide equal opportunities without regard to race, color, religion, national origin, gender, sexual preference, age, or disability.

Completed Application Instructions

Thank you for completing this application form and for your interest in volunteering with us. If you are volunteering at a Recreation Center, call for an appointment at 410-396-7605 (Personnel Unit) Mon.-Fri. 9:00 a.m. - 4:00 p.m. For all other volunteers, email application to mary.hardcastle@baltimorecity.gov or drop off at Baltimore City Recreation & Parks, 3001 East Drive, Baltimore, MD 21217.

<table>
<thead>
<tr>
<th>Center/Park Director Signature</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Center/Park/Unit Name</td>
<td></td>
</tr>
<tr>
<td>Date</td>
<td></td>
</tr>
</tbody>
</table>

OFFICE USE ONLY:

Date Fingerprinted:___________________________________ by ________________________________

Cleared:__________________________                                          Not Cleared_____________________________

(date)                                                                                                               (date)
BCRP VOLUNTEER LIABILITY WAIVER/PERMISSION

Voluntary Participation: I acknowledge that I have voluntarily applied to assist at Department of Recreation and Parks facilities or at Park owned property or facility. I understand that as a volunteer I will not be paid for my services and I will not be eligible for any Workers Compensation benefits or medical or any other insurance coverage as part of my services.

Release:
1. In connection with, and with consideration of my participation in this project/program, to the fullest extent permitted by law, I hereby release and forever discharge and agree that I, my assignees, heirs, guardians, and legal representatives, will not make a claim against the Baltimore City Department of Recreation and Parks or any City agencies, or their officers, directors, staff, collectively or individually, or the suppliers of any materials or equipment that is used by the project, or any of the volunteer workers, for any injury or death to me, however caused, arising from my participation in this project/program whether due to negligence, mistake, or other action or inaction of Baltimore City Recreation & Parks or any person or entity.

2. Knowing the potential dangers, hazards, and risks associated with any project/program, and with sufficient knowledge of my physical condition and limitations, if any, I voluntarily assume all responsibility and risk of loss, damage, illness and/or injury to person or property in any way associated with my participation in the project/program.

3. I agree to abide by all rules/regulations applicable to participation in this project/program. Should I require emergency medical treatment or first aid as a result of illness or injury associated with the project or related activities, I consent to such first aid/treatment.

4. I, further, consent to the unrestricted use by Baltimore City Recreation and Parks and/or persons authorized by them, of any photographs, recordings, interviews, videos, or similar visual recording of me for outreach publicity and/or educational purposes, without limitation or compensation.

Name (please print): __________________________________________
Name of Legal Guardian if under 18 (please print): _________________________
Signature (or signature of guardian if under age 18): _________________________
Date: __________________________

25
# MONTHLY VOLUNTEERS HOURS REPORT - INDIVIDUAL SENIOR VOLUNTEERS

Center/Facility/Program: ________________________________ Supervisor: ________________________________

Fax 410-396-7079    YEAR: ________

<table>
<thead>
<tr>
<th>PRINT/TYPe VOLUNTEERNAME (Last/First)</th>
<th>JAN</th>
<th>FEB</th>
<th>MAR</th>
<th>APR</th>
<th>MAY</th>
<th>JUN</th>
<th>JUL</th>
<th>AUG</th>
<th>SEP</th>
<th>OCT</th>
<th>NOV</th>
<th>DEC</th>
<th>THIS YEAR</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
**Material or In-Kind Donations** (such as from contractors, businesses, community members, etc.)

<table>
<thead>
<tr>
<th>Item</th>
<th>Dollar value</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Monetary Donations or Matching Grants** (from individuals, businesses, foundations, etc.)

<table>
<thead>
<tr>
<th>From</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Mail to: bcrp.volunteers@baltimorecity.gov
MONTHLY VOLUNTEERS HOURS REPORT – INDIVIDUAL JUNIOR VOLUNTEERS

Center/Facility/Program: ________________________________
Supervisor: _____________________________________________________________________________
YEAR: _____

<table>
<thead>
<tr>
<th>PRINT/TYP TYPE VOLUNTEERNAME (Last/First)</th>
<th>JAN</th>
<th>FEB</th>
<th>MAR</th>
<th>APR</th>
<th>MAY</th>
<th>JUN</th>
<th>JUL</th>
<th>AUG</th>
<th>SEP</th>
<th>OCT</th>
<th>NOV</th>
<th>DEC</th>
<th>THIS YEAR TOTAL</th>
<th>FORMER TOTAL</th>
<th>NEW TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

28
Material or In-Kind Donations (such as from contractors, businesses, community members, etc.)

<table>
<thead>
<tr>
<th>Item:</th>
<th>Dollar value:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Monetary Donations or Matching Grants (from individuals, businesses, foundations, etc.)

<table>
<thead>
<tr>
<th>From:</th>
<th>Amount:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Mail to: bcrp.volunteers@baltimorecity.gov
### VOLUNTEER CONTACT INFORMATION

**CENTER/PROGRAM NAME:** ____________________________________  **DIRECTOR NAME:** ____________________________________  

<table>
<thead>
<tr>
<th>NAME</th>
<th>ADDRESS</th>
<th>TELEPHONE</th>
<th>EMAIL</th>
<th>FINGERPRINTED (Y=yes) (N=no)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>