



**VOLUNTEER IN YOUTH SPORTS
Consent/Release Form**

Name of Organization: **Botetourt County Department of Parks and Recreation**

Head Coach Asst. Coach Team Name: _____ Age Group: _____

Recreation Club: _____

Full Legal Name: _____

Date of Birth: ____/____/____ Social Security Number: ____-____-____

Residence Address:

Street: _____

City: _____ State: _____ Zip: _____

Sex: (circle one) Male / Female Sport: _____ Season Year: _____

I, the undersigned, by execution of this document, give the Botetourt County permission to conduct a background check regarding my qualifications to coach in the Botetourt County Parks and Recreation athletic program;

I understand that I have a right to: (1) obtain a copy of my background check report and (2) challenge the accuracy of any information contained in this report by contacting the third party responsible for conducting the background check by calling the telephone number listed on the report.

By signing this application, I agree to the following:

- I certify that I have not been convicted and do not have charges currently pending against me for any of the disqualifying crimes listed on page three (3) of the Background Screening Policy.
- I agree that at all times while serving as a volunteer coach for the Botetourt County Parks and Recreation Department, I will immediately notify the Parks and Recreation Department and my booster club's sport coordinator if I am charged with any of the disqualifying crimes.

Print Name: _____ Date: _____

Signature: _____