



**Recreation and Park Commission for East Baton Rouge Parish**  
Volunteer Consent/Release Form

Applicant's Name (printed) \_\_\_\_\_

Social Security Number \_\_\_\_\_ Date of Birth \_\_\_\_\_

Phone Number \_\_\_\_\_ Email Address \_\_\_\_\_

Applicant's Physical Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Mailing Address (if different from above) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

I, \_\_\_\_\_, authorize and give consent for the above named organization to obtain information regarding myself. This includes the following:

- Criminal background records/information
- Sex Offender Registry Checks
- Addresses

I, the undersigned, authorize this information to be obtained either in writing or via telephone in connection with my volunteer application. Any person, firm or organization providing information or records in accordance with this authorization is released from any and all claims of liability for compliance. Such information will be held in confidence in accordance with the organization's guidelines.

Printed Name: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_

A copy of BREC's Volunteer Credentialing Policy can be obtained by contacting the BREC Volunteer Coordinator at 225.272.9200 x581.

To be completed by BREC Staff Member who will be supervising volunteer before turning into Volunteer Coordinator:

Facility/Program \_\_\_\_\_ Volunteer Position \_\_\_\_\_

Supervisor Name and Contact Number \_\_\_\_\_