

2020-2021 **Murfreesboro Youth Basketball Program** Coaches Form and Background Checks UNDER STATE LAW, THIS DOCUMENT IS A PUBLIC RECORD

Name:	Date of Birth:				
Address:					
City:					
Phone:(h)	(c)	(w)			
Email Address:					
Do you have a child(ren) play	ing Basketball? Yes	_ No			
If yes, Name:		Age:			
Please check all that apply: I wish to be:he	ead coachassistar	nt coachdoes	n't matter		
Is there someone you wish to Please list names (note	coach with? Yese: there are no guarantees		ay be placed with).		
Have you ever coached youth If yes, how many years	basketball? Yes and with what organizat				
7 & 8 Boys	9 & 10 Boys 9 & 10 Girls 11 & 12 Boys	11 & 12 Girls 13 – 14 Boys 13 - 17 Girls	Any		
Do you have a valid driver's li	cense? Yes No				
Driver's License#:					
Have you ever been convicted)		

PLEASE SIGN BOTH RELEASE STATEMENTS ON THE BACK PAGE

As a condition of volunteering, I give permission for the City of Murfreesboro to conduct a background check on me, which may include a review of sex offender registries, child abuse and criminal history records and other sources of information not listed here. I understand that, if selected, my volunteer position is conditional upon the City of Murfreesboro receiving no inappropriate information on my background such as:

Must not have been convicted of, pleaded guilty to, entered a plea of *nolo contendere* to, or received judicial diversion for any:

- Sexual offense, or have been placed on a sexual offender registry, regardless of the amount of time since the offense;
- Violent felony, regardless of the amount of time since the offense;
- Violation of any federal or state laws or city ordinances relating to force or violence within the last five (5) years;
- Felony offense other than violence or sex within the past five (5) years; or,
- Federal or state misdemeanor charges involving use, possession, manufacture, or sale of controlled substances or drug paraphernalia or felony use of controlled substance within the past ten (10) years.

I hereby, release and agree to hold harmless from liability the City of Murfreesboro, the officers, employees and volunteers thereof, and/or any other person and/or organization that may provide such information from any and all liability or damages including any and all claims which might be made based upon the providing of such information or use of such information by the City, its officers, employees and volunteers without regard to whether the information is accurate.

Applicant Signature		Date				
Applicant Name (please print or type)						
OITY OF MUREPEODORO VOLUNTEER WORKERS						

CITY OF MURFREESBORO VOLUNTEER WORKERS WAIVER AND RELEASE OF LIABILITY & HOLD HARMLESS AGREEMENT PLEASE READ CAREFULLY

In consideration for permission to participate as a volunteer in a City of Murfreesboro ("City") public service project for the MPRD Athletic Dept. as a coach, I agree as follows:

- 1. I have considered and evaluated the risks, danger and possibility of injury resulting from participation as a volunteer performing a public service project for the City of Murfreesboro.
- I know and understand foreseeable and unforeseeable injuries from common or unexpected sources
 could occur from the nature of the activity, conditions of the location and from actions of myself, other
 participants, the City, its employees or volunteers, and other persons involved in this public service
 project.
- 3. I deliberately and knowingly assume all costs, risks of injury and/or other damages including but not limited to, cost of medical treatment, permanent injury or death, and my property damages resulting from my participation in the public service project. I waive, release and hold harmless the City, its employees, volunteers, and agents form all legal and financial responsibility and from all costs, injuries and/or other damages which might occur while I am participating in the public service project.
- 4. I give my permission to the City of Murfreesboro for any photos or video footage of myself taken during the course of this public service project to be used for educational, promotional, or any other purpose by the City of Murfreesboro.

Print Name		Signature		. Date		
The City of Murfreesboro does not exclude anyone from participation nor deny the benefits of or otherwise subject anyone to discrimination on the basis of race, national origin, color, age, sex, disability or veteran status. Any complaint alleging discrimination may be filed with the Mayor of the City of Murfreesboro.						
Approved	Rejected	Checked by		on		