SUGAR GROVE PARK DISTRICT

Volunteer Coach Application

If you are interested in coaching for the Sugar Grove Park District please complete this form.
Applications are accepted once registration for the specific league opens.

Volunteer Coach's Name:		Sport Name:	
Child's Name:		Age/Grade Level:	
Street Address:			
City:		Zip Code:	
Home Phone Number:		Cell Phone Number:	
Email Address:			

I am interested in volunteering as ☐ head coach ☐ assistant coach.

Do you have any previous coaching experience? ☐ Yes ☐ No

If yes, please explain: _____

Have you ever coached for the Sugar Grove Park District? ☐ Yes ☐ No

If yes, what have you coached? _____

Have you had any formal training (clinics, coaching association memberships)? ☐ Yes ☐ No

If yes, please explain: _____

Please describe your coaching philosophy.

_____

_____

What are your goals/objectives for the season?

_____

_____

***Filling out this form does not guarantee a coaching position. Applications will be reviewed after registration has closed. Selected coaches will be contacted at least two weeks prior to the start of the program. If necessary, you may be contacted for an interview.**

I have read and understand the above information:

Signature: _____ Date: _____

(Rev 11/2021)

Sugar Grove Park District

VOLUNTEER WAIVER & RELEASE

IMPORTANT INFORMATION

The Sugar Grove Park District is committed to conducting its recreation programs and activities in a safe manner and holds the safety of volunteers in high regard. The Sugar Grove Park District continually strives to reduce such risks and asks that all volunteers follow safety rules and instructions that are designed to protect the volunteer's safety. However, volunteers must recognize that there is an inherent risk of injury when choosing to volunteer for any activity or program.

Please recognize that the Sugar Grove Park District carries only limited medical accident coverage for volunteers; therefore, it is strongly urged that all volunteers review their own health insurance policy for coverage. Additionally, each volunteer is solely responsible for determining if he/she is physically fit and/or properly skilled for any volunteer activity. It is always advisable, especially if the volunteer is pregnant, disabled in any way or recently suffered an illness, injury or impairment, to consult a physician before undertaking any physical activity.

WARNING OF RISK

Despite careful and proper preparation, instruction, medical advice, conditioning and equipment, there is still a risk of serious injury when providing volunteer services. Understandably, not all hazards and dangers can be foreseen. Volunteers must understand that depending upon the volunteer services, certain risks, dangers and injuries due to acts of God, inclement weather, slip and falls, inadequate or defective equipment, failure in supervision or instruction, premises defects, horseplay, carelessness, lack of skill or technique, and all other circumstances inherent to the particular volunteer services exist. In this regard, it must be recognized that it is impossible for the Sugar Grove Park District to guarantee absolute safety.

WAIVER AND RELEASE OF ALL CLAIMS AND ASSUMPTION OF RISK

Please read this form carefully and be aware that in consideration for providing volunteer services, you will be expressly assuming the risk and legal liability and waiving and releasing all claims for injuries, damages or loss which you may sustain as a result of participating in any and all activities connected with and associated with your volunteer services (including transportation services/vehicle operations, when provided).

As a volunteer, I recognize and acknowledge that there are certain risks of physical injury to volunteers in this program/activity, and I voluntarily agree to assume the full risk of any and all injuries, damages or loss, regardless of severity, that I may sustain as a result of my volunteer services. I further agree to waive and relinquish all claims I may have (or accrue to me) as a result of my volunteer services against the Sugar Grove Park District, including its officers, officials, agents, volunteers and employees (hereinafter collectively referred as "Parties").

I do hereby fully release and forever discharge the Parties from any and all claims for injuries, damages, or loss that I may have or which may accrue to me and arising out of, connected with, or in any way associated with my volunteer services.

I have read and fully understand the above important information, warning of risk, assumption of risk and waiver and release of all claims. If registering on-line or via fax, my on-line or facsimile signature shall substitute for and have the same legal effect as an original form signature.

PLEASE PRINT

Volunteer's Name _____

Volunteer's Signature _____

Date _____

Coaches  Code of Conduct

1. I will demonstrate positive sportsmanship at all times. I will be a good sport to umpires/officials, coaches, players, parents, family members, friends and staff.

2. I will show respect to all players, parents, coaches, family members, friends, umpires/officials and staff.

3. I will respect all facilities, land and equipment and I will not intentionally damage any of these things.

4. As a coach, I will not use tobacco, tobacco products, drugs, or alcoholic beverages while attending practices or games. The use of tobacco, tobacco products, drugs, or alcoholic beverages is prohibited at every game or practice.

5. I will learn and follow the rules of the game, as presented.

6. Players, parents, family members, and coaches will not use profanity, profane gestures, insults, threats, taunts, booing, or demeaning comments at any time.

7. I will not intentionally injure or encourage anyone to intentionally injure another player, coach, umpire/official, staff member, or family member.

8. I will remember that this is a recreational league and experiences at practices and games should be a chance to learn the game, but most of all, be fun.

9. I will respect the authority of the officials/umpires during games and will leave interactions with the officials/umpires to the coaches. As a coach, I will discuss any disagreements with an official/umpire in a civil and calm manner. I understand that the umpire has the final say.

10. I will not engage in violence or abuse of any kind.

Coaches  Code of Conduct

I have read and understand the Coaches Code of Conduct. I agree to abide by this Code at all team and league activities. I understand this Code also applies to all family members and friends attending team and league activities. If I do not follow this Code of Conduct, I understand that I may be asked to leave or forfeit my privileges as a coach, player, parent, or spectator.

Each coach, including assistants, must review the Code of Conduct and then sign it.

1. Coach Name: _____ 2. Date: _____
3. Coach Signature: _____
4. Assistant Coach Printed Name: _____
5. Assistant Coach Signature: _____
6. Assistant Coach Printed Name: _____
7. Assistant Coach Signature: _____

Sugar Grove Park District

Background Check Information Form

Printed Last Name:_____ **Printed First Name:**_____

Middle Initial:_____ **City of Residence:**_____ **Zip Code:**_____

Driver's License Number:_____ **D/L State:**_____ **Date of Birth**_____

Please check the categories which apply to you:

GENDER (SEX) INFORMATION: Male ☐ Female ☐

RACE/ETHNIC GROUP INFORMATION:

☐ **Black (African American) not of Hispanic Origin:** All persons having origins in any of the Black racial groups of Africa.

☐ **Asian or Pacific Islander:** All persons having origins in any of the original peoples of the Far East, Southeast Asia, the Indian Subcontinent, or the Pacific Islands. This area includes, for example, China, Japan, Korea, the Philippine Islands, Samoa and India.

☐ **American Indian or Alaskan Native:** All persons having origins in any of the original peoples of North America and who maintain cultural identification through tribal affiliation or community recognition.

☐ **Hispanic:** All persons of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin, regardless of race.

☐ **White, not of Hispanic Origin:** All persons having origins in any of the original peoples of Europe, North Africa or the Middle East.

Printed Name:_____ **Date:**_____

Signature:_____

Sugar Grove Park District
Non-Discrimination and Anti-Harassment Policy
& Signed Acknowledgment

Introduction

The Park District is committed to a work environment in which all individuals are treated with respect and dignity. Each individual has the right to work in a professional atmosphere that prohibits discriminatory practices, including harassment. Therefore, the Park District expects that all relationships among persons in the workplace will be business-like and free of bias, prejudice and harassment.

It is the responsibility of each and every employee, officer, official, park commissioner, agent, volunteer, and vendor of the Park District as well as anyone using the Park District's facilities, to refrain from sexual and other harassment. The Park District will not tolerate sexual or any other type of harassment of or by any of its employees and elected officials. Actions, words, jokes, or comments based on an individual's sex, race, national origin, age, religion, sexual orientation, civil union partnership, or any other legally protected characteristic will not be tolerated.

I hereby acknowledge receipt of the Sugar Grove Park District Policy on Non-Discrimination and Anti-Harassment. I agree and represent that I have read this Policy thoroughly and in its entirety. I agree that if there is any wording or provision in the Policy that I do not understand, I will seek clarification from my supervisor, department head, or Director.

Please sign and date this acknowledgment.

Signature: _____

Print Name: _____

Date: _____

Illinois Department of
DCFS
Children & Family Services

ACKNOWLEDGEMENT OF MANDATED REPORTER STATUS

I, _____, understand that when I am employed as a
(Employee Name)

_____, I will become a mandated reporter under the
(Type of Employment)
Abused and Neglected Child Reporting Act [325 ILCS 5/4]. This means that I am required to report or cause a report to be made to the child abuse and neglect Hotline number at 1-800-25-ABUSE (1-800-252-2873) whenever I have reasonable cause to believe that a child known to me in my professional or official capacity may be abused or neglected. I understand that there is no charge when calling the Hotline number and that the Hotline operates 24-hours per day, 7 days per week, 365 days per year.

I understand that in an effort to help mandated reporters understand their critical role in protecting children by recognizing and reporting child abuse/neglect, DCFS administers an online training course entitled **Recognizing and Reporting Child Abuse: Training for Mandated Reporters**, available 24 hours a day, seven days a week.

I further understand that the privileged quality of communication between me and my patient or client is not grounds for failure to report suspected child abuse or neglect, I know that if I willfully fail to report suspected child abuse or neglect, I may be found guilty of a Class A misdemeanor. This does not apply to physicians who will be referred to the Illinois State Medical Disciplinary Board for action.

I also understand that if I am subject to licensing under, but not limited to, the following acts: the Illinois Nursing Act of 1987, the Medical Practice Act of 1987, the Illinois Dental Practice Act, the School Code, the Acupuncture Practice Act, the Illinois Optometric Practice Act of 1987, the Illinois Physical Therapy Act, the Physician Assistants Practice Act of 1987, the Podiatric Medical Practice Act of 1987, the Clinical Psychologist Licensing Act, the Clinical Social Work and Social Work Practice Act, the Illinois Athletic Trainers Practice Act, the Dietetic and Nutrition Services Practice Act, the Marriage and Family Therapy Act, the Naprapathic Practice Act, the Respiratory Care Practice Act, the Professional Counselor and Clinical Professional Counselor Licensing Act, the Illinois Speech-Language Pathology and Audiology Practice Act, I may be subject to license suspension or revocation if I willfully fail to report suspected child abuse or neglect.

I affirm that I have read this statement and have knowledge and understanding of the reporting requirements, which apply to me under the Abused and Neglected Child Reporting Act.

_____
Signature of Applicant/Employee

_____
Date

CANTS 22
Rev. 5/2019

Office of the Director
406 E. Monroe Street • Springfield, Illinois 62701
www.DCFS.illinois.gov

Safety Training

PLEASE PRINT

SUGAR GROVE PARK DISTRICT

Employee/Volunteer: _____

	TOPIC	DATE COMPLETED
1.	Injury Prevention: Core 6 Strategy	
	A. Correct Equipment	_____
	B. 30-Second Site Safety Walk Through	_____
	C. Personal Protective Equipment	_____
	D. 3 Points of Contact	_____
	E. Reversal of Posture/Stretching	_____
	F. Best Practice Lifting	_____
2.	Reporting of Hazardous Conditions	_____
3.	Coverage of Specific Safety Rules	_____
4.	Accident/Incident Reporting Procedures	_____
5.	Statement of Admission	_____
6.	Communicable Diseases/Bloodborne Pathogens	_____
7.	Emergency Response Plan	_____
8.	Hazard Communication – Right-to-Know	_____
9.	Driving Standards	_____
10.	Check Rides for Each Vehicle	_____
11.	Non-Discrimination & Anti-Harassment Policy	_____
12.	Training on High Risk Equipment	_____
13.	Child Abuse Reporting Act – Mandated Reporter	_____
14.	Alcohol and Drug Policy	_____
15.	Personnel Policies	_____
16.	Patron Behavior Management	_____
17.	Fire Extinguishers	_____
18.	~~Respirator Use~~	Not Applicable
19.	Hearing Protection	_____
20.	Footwear Policy	_____
21.	Fall Protection	_____
22.	Lock Out/Tag Out	_____
23.	~~Confined Space~~	Not Applicable
24.	~~Powered Industrial Trucks (Forklifts)~~	Not Applicable
25.	Crisis Media Planning	_____
26.	Job Specific Training	_____

I acknowledge that I have complete training in the above areas. I understand the topics covered and know that it is my responsibility to be familiar with the information presented or inquire further if I require clarification.

Employee/Volunteer Signature: _____ Date: _____

Training Supervisor: _____ Date: _____

Safety Training

1. **Injury Prevention: Core 6 Strategy**

   A. Correct Equipment – Always use the correct equipment for the job. Use additional equipment if it will make the job safer.

   B. 30-Second Site Survey – By conducting a 30-Second Site Safety Walk-Through, an employee can minimize the likelihood of an injury. A 30-Second Site Safety Walk-Through should be conducted prior to beginning work at any job site or job task. Any hazards or safety concerns observed during the 30-Second Site Safety Walk-Through should be eliminated or steps taken to minimize the hazard. Below are some important factors when conducting your walk-through:

   - ***Pause before you approach***:
     - Ask yourself: "Are there any obvious potential safety hazards?"
     - Generally, your first impression will be correct.
   - ***Observe your surroundings***
     - What is there about the location, terrain, ground or flooring that could create a hazard or cause an injury?
   - ***Observe the traffic in or around the worksite***
     - Will vehicle or pedestrian traffic cause a safety hazard or concern?
   - ***Protect yourself!***
     - Should you be wearing personal protective equipment?
     - Are you wearing the appropriate footwear to safely perform the job?
   - ***Consider the unknown:***
     - What is unique about the site that may cause a safety concern?
     - Will the equipment, materials or job task introduce safety concerns?

   C. Personal Protective Equipment – The park district provides personal protective equipment and training in its use to each employee who works with hazards that might require such protection. Your supervisor provides training. Once provided with the PPE, employees must wear it at all times while working with the hazard.

   D. 3 Points of Contact - Employees are encouraged to use the 3 Points of Contact method during any activity where they are entering/exiting vehicles or mounting/dismounting equipment. The 3 Points Contact method is maintaining contact with on hand and two feet or two hands and one foot at all times when entering or exiting a vehicle.

   E. Reversal of Posture/Stretching- It is important to stretch before and after strenuous activities. Doing so will allow you to avoid unnecessary injury. Warm up first – stretching muscles when cold increases your risk of pulled muscles. Warm up by walking while gently pumping your arms, or do a favorite exercise at low intensity for five minutes. Hold each stretch for at least 30 seconds and don't bounce. Stretch before and after a strenuous activity. Reduce fatigue by taking a break from time-consuming activities to stretch.

   F. Best Practice Lifting- There are several basic rules of lifting and moving that can help prevent back injuries:
      a. Lift with your legs, not your back; this is because your leg muscles are larger and better positioned over the hips and knees to provide this activity.
      b. Do not twist; instead, always position your hips and feet toward the object you are lifting or moving.
      c. Maintain the natural curves of the neck, upper back and lower back while lifting, moving and even sitting.
      d. Keep objects close to your body at waist level; this reduces the leverage on your spine.

e. Push, rather than pull when possible. Pushing naturally places your legs in a position to do the work whereas pulling naturally places your back in a forward bent position.

2. Reporting Hazardous Conditions

The park district recognizes the need to maintain an ongoing safety inspection program. As park district employees, we ask that you assist in this effort by reporting any unsafe condition found in the daily course of your duties.

3. Coverage of Specific Safety Rules

Depending on your position, there may be safety rules that are specific to the type of job you are doing. Additionally, there are safety rules for operation of vehicles and equipment. Your supervisor will review these rules with you. The park district conducts regular trainings. It is the responsibility of the employee to attend training and to familiarize themselves with the safety rules.

4. Accident/Incident Reporting Procedures

Employees must immediately report to their supervisor any injuries, accidents or damage that occur to park district employees, participants, vehicles, equipment or property. The supervisor is responsible for immediately completing accident report and forwarding it to the Safety Coordinator. (See PDRMA Form 01)

5. Statements of Admission

No matter what the circumstances, employees should never make any statement of admission or speculate on the causes of an accident or injury. Any questions in this regard should be directed to the Safety Coordinator, Director or appropriate department manager.

6. Communicable Diseases/ Bloodborne Pathogens

Bloodborne pathogens are diseases that are carried by blood or other bodily fluids. When dealing with any bodily fluid, you should assume that it is infectious and take precautions like wearing gloves, face shield, CPR shield, or eye protection. Make sure to dispose of contaminated material properly and wash hands thoroughly.

7. Emergency Response Plan

Depending on your position, there may be an emergency response plan that is specific to the type of job you are doing or location. Your supervisor will review this plan with you. It has been developed to serve as a guide and resource for the proper implementation of actions to be accomplished during a disaster. Through use of this plan, injuries and property damage can be kept to a minimum.

8. Hazard Communication – Right-to-Know Training

The park district recognizes the Illinois Right to Know law, and will exercise care in providing a safe and healthful work environment for its employees. The park district will make available all pertinent information regarding toxic substances, as required by law, in the following manner:

a. Poster displayed at each location of employment informing employees of their rights and responsibilities.
b. Safety Data Sheets (SDS) maintained for each chemical or substance;
c. annual training;
d. uniform labeling system.

9. Driving Standards

Only employees eighteen years old and possessing a valid drivers' license are permitted to operate park district vehicles on public roadways. Employees complete annual checkrides for each vehicle they may operate. They are also subject to annual driver abstract checks. Any employee whose license is suspended must immediately notify his/her supervisor. Any CDL drivers must comply with DOT policies. While operating district vehicles, employees are required to obey all state laws including mandatory use of seat belts.

10. Check Rides for Each Vehicle
Employees complete annual check rides for each vehicle they may operate. Your supervisor will conduct this on-road safety check with you.

11. Non-Discrimination and Anti-Harassment Policy
It is the responsibility of each and every employee, officer, official, Park Commissioner, agent, volunteer and vendor of the park district to refrain from harassment. If you witness harassment or believe yourself to be the object of harassment, you should deal with the incident as directly and firmly as possible by clearly communicating your position to the offending employee and your immediate supervisor and/or the director. (See policy and sign acknowledgment)

12. Training on High Risk Equipment
No employee is permitted to operate any equipment involving high risk of injury without proper training by the employee's supervisor. Operating high risk equipment without complete training is cause for disciplinary action.

13. Child Abuse Reporting Act
The Illinois Abused and Neglected Child Reporting Act provides guidelines for the reporting of child abuse and neglect. Any staff member having reasonable cause to believe a child known to them in their official capacity may be an abused or a neglected child is required to immediately report their concerns to DCFS. (See definitions and signs of child abuse/neglect. Sign DCFS acknowledgement of mandated reporter status)

14. Alcohol and Drug Policy
The unlawful manufacture, distribution, dispensation, possession or use of a controlled substance, including cannabis and alcohol is prohibited on park district property. There are provisions for voluntary reporting and treatment without adverse employment consequences. There are consequences for employees who violate the policy.

15. Personnel Policies
The Park District is proud of its record of continuing growth and expansion of services offered to the residents of the Park District. The growth and reputation of the Park District are the direct results of individual efforts and close cooperation by all of our employees. Our future success will depend upon continuation of these efforts, along with good safety habits, and adherence to the highest professional standards and ideals.

16. Patron Behavior Management
A caring, positive approach will be taken regarding discipline. Each participant or facility patron is expected to:

a. Treat all participants/patrons and staff with respect.
b. Respect all equipment.
c. Follow all rules so he/she will not place him/herself or others in a dangerous situation.

The participant/patron or the parent/guardian will be informed of the specific disruptive behavior, what corrective action on their part must be taken and what the potential consequences will be. An incident report will be completed and filed.

17. Fire Extinguishers
Remember the 3 A's – **Activate** the building alarm system or call 911, **Assist** any persons in immediate danger or those incapable to leave the danger area on their own, **Attempt** to extinguish the fire if it is small, contained, nontoxic, and your instincts tell you its ok.
PASS – **Pull** the pin, **Aim** the nozzle, **Squeeze** the handle, and **Sweep** back and forth at the base of the fire.

~~**18. Respirator Use**~~

19. Hearing Protection

Employees exposed to high noise levels for extended periods of time can suffer permanent hearing damage. Ear protection is recommended to avoid permanent hearing damage. The two most common types of ear protection are moldable earplugs and earmuffs.

20. Footwear Policy

The wide variety of maintenance tasks conducted at our agency makes it difficult to require employees to wear safety shoes at all times. In some cases, metal sole inserts or steel toes can make bending and kneeling difficult and can chill feet during winter months. However, it is important that employees have foot protection available when specific jobs warrant their use.

21. Fall Protection

When using a portable ladder, be sure to match the size and type of ladder with the job for which it will be used. Inspect ladder prior to use. Open completely so that the braces are fully engaged before stepping up and onto the ladder. When possible, have a second staff person hold ladder while you are climbing. Never use the top as a step. Always have 3 points of contact on the ladder while using. Only those employees that have been properly trained on the use of the man-lift may operate it.

22. Lock Out/Tag Out

OSHA requires employers to complete assessments for all work places to determine the need for securing energy sources on equipment prior to performing maintenance, cleaning and adjustment tasks. Lockout is the placement of a lockout devices such as a key lock on the energy isolating device. Tagout is the use of a prominent warning device such as a tag that can be securely fastened to the energy isolating device. If an energy device is locked out or tagged out, staff is required to keep out.

~~**23. Confined Space**~~

~~**24. Powered Industrial Trucks (Forklifts)**~~

25. Crisis Media Planning

A crisis is a situation or event that causes, or has potential to cause, keen public or media concern. In the event of a crisis, the crisis management team is comprised of authorized persons who are responsible for taking charge of the crisis situation. The chain of responsibility order for the crisis team is: (1) Executive Director, (2) Superintendent of Parks, (3) Superintendent of Recreation, (4) Program Manager. The Executive Director is the official spokesperson for the agency.

26. Job Specific Training

Your supervisor will review any safety issues related to your specific duties.

Additional Training Resources:

a. Core 6 Strategy poster & wallet cards
b. 30-second site survey video
c. 3 points of contact CD
d. TurfGator Video
e. Jacobsen Mower Video
f. Fleet Safety Video
g. Trailer Procedures
h. Backing Procedures
i. First Aid & CPR classes
j. Concussion Signs, Symptoms, & Action Plan

More detailed information about these training topics can be found in the Sugar Grove Park District Personnel Polices Manual and in the Safety Manual. These manuals are available for your review at any time in our administrative offices.