

# **SOCIETY FOR HANDICAPPED CHILDREN AND ADULTS 2009 WATER SKIING UNLIMITED VOLUNTEER PACKET**

## **What does Society for Handicapped Water Skiing Unlimited need?**

We need volunteers of all level of ski ability. Non skiers yet strong swimmers are needed to help disabled children and adults enjoy the sport of water skiing. Minimum age to volunteer is 15 years old.

## **Where is the program held?**

All of our ski dates are at Modesto Reservoir. There is an \$8.00 entrance fee. Reimbursement of this fee is available by returning your receipt for the fee to Society for Handicapped office.

## **How much time is involved?**

We ask that every Skiing Unlimited volunteer give at least one Saturday in the water ski season to help with the program. The day begins at 9:00 am and ends about 3:00 pm.

## **How do I learn what to do?**

All training is done at Modesto Reservoir on the day you volunteer, there will be experienced and trained volunteers to assist you. It's fun! We appreciate your willingness to give your valuable time and talent for this program.

## **What do I bring?**

We do recommend you bring sunscreen, water shoes, a Shorty wetsuit if you have one and a chair or blanket for the beach. Prepare for a day at the beach.

## **What should I leave at home?**

Please do not bring Jet Ski's or boats without prior approval or only if requested to do so by the Society office. To insure absolute safety, Ski boats and Jet Ski's are only allowed in the water for the adapted ski clients. These are not family ski days. Leave the alcohol at home as well; no drinking of alcohol is allowed when we are skiing with our participants.

## **What are the 2009 ski dates?**

**June 20                      July 25                      August 15                      September 19**

## **KICK OFF AND TRAINING DAY    TBD**

*All volunteers are encouraged to sign up for this date*

## **How do I sign up?**

If you haven't done so already, please fill and return pages 3, 4 and 5 of the 2009 Water Skiing Volunteer application packet which includes the application, the background check authorization and the hold harmless agreement for Stanislaus County Parks and Recreation. Then choose the ski dates that you are available to give that important gift of TIME! All volunteers must submit a 2009 application regardless of your previous volunteer experience with the Society for Handicapped.

**You can mail your application to Society for Handicapped 1129 8<sup>th</sup> Street, Modesto Ca. 95354 or you may also fax the application to 209-524-1205.** Once your background check is clear, you are ready to go. You will receive an email confirming receipt of your application and your background clearance.

## **What happens next?**

You will get an email or a call (if no email is available) the Friday of the week before your scheduled ski date to remind you that you are committed to volunteer the following Saturday. There is no need to respond to that reminder unless you have a sudden emergency and cannot make the trip. All cancellations need to be made by the Monday of the week of the trip. Always remember the clients count on you, they are very excited to go skiing, and we need you to honor your commitment.

## **Where Do I go when I get to Modesto Reservoir?**

Please make a left turn after you enter the reservoir gate and go as far as possible to the back, please allow 15 minutes to reach this area. There will be a base volunteer to check you in and give you any instructions you may need.

**What if a trip is cancelled?** The office will make every effort to contact you if it is not reasonable to go forward with the trip because of weather issues or an inadequate volunteer base. Sometimes this decision is not made until the Friday before the trip. If you are unsure, please call the office, there will be a recording on our voice mail after hours if the trip has been cancelled. Emails will also be sent to all participating volunteers.

**What if I have more questions? Do not hesitate to contact Bonnie at 524-3536 or Bohara@societyforhandicapped.org**

**SOCIETY FOR HANDICAPPED CHILDREN AND ADULTS**  
**1129 8<sup>th</sup> Street Suite 101 Modesto, Ca. 95354**  
**2009 WATER SKIING UNLIMITED**  
**GENERAL RULES, PROCEDURES AND INFORMATION**

*Please read carefully and keep for your future information*

In order to insure the success of this program, we ask everyone to be aware of the following rules and information. Please read the following information carefully, there have been changes to the program.

- All volunteers must fill out a registration form for each new ski year (no exceptions) and must have had a background check performed by the Society for Handicapped within the **last three years** before participating on a scheduled trip. If in doubt how long it has been since you had had a background check with the Society for Handicapped, please complete the background authorization form and return it with your application; no unnecessary checks will be done. The background check authorization's are in the volunteer packets.
- Volunteers will not be allowed to participate without a signed registration, a completed hold harmless agreement and cleared background check on file. The registration forms are available by contacting the Society office. Volunteers who show up at an Adapted Ski day without applications on file will **NOT BE ALLOWED TO PARTICIPATE**. No exceptions will be made to this rule.
- On the last business day before a scheduled trip (usually the Friday before the trip); please contact the Society office at 524-3536 if you are scheduled to attend that trip to confirm the trip is still scheduled. This is necessary due to last minute changes that occur due to volunteer/participant ratio, weather conditions or other unforeseen problems that may cancel the trip. If you call after office hours, there will be a message on the voice mail if the trip has been cancelled, you must call 524-3536 to get that message.
- When meeting places and times are set, it is important to be prompt. Allow enough time for travel to our meeting location. Volunteers need to be at the ski site by 9 am.
- Volunteers are responsible for their own transportation.
- Water shoes are required and sunglasses, hats or visors and sunscreen is recommended and the responsibility of the participant and volunteer. Please also bring a chair, blanket and umbrella for shade. Participants must bring their own lunches and or snacks for the day.
- For insurance and safety purposes, no alcoholic beverages will be allowed during any ski trip by either participants or volunteers.

*(Keep this page for your information)*

**SOCIETY FOR HANDICAPPED CHILDREN AND ADULTS**  
**1129 8<sup>th</sup> St, Suite 101, Modesto CA 95354**  
**2009 WATER SKIING UNLIMITED VOLUNTEER APPLICATION**

Applicant's Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ \*Age \_\_\_\_\_

**\*Please note-if you are 18 or over you must complete a background check authorization-no exceptions**

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

Email Address \_\_\_\_\_

**Required- Most communication will be done through email**

Phone: Home \_\_\_\_\_ Work \_\_\_\_\_ Cell \_\_\_\_\_

Place of Employment \_\_\_\_\_

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

How did you hear about this program? \_\_\_\_\_

Experience with Disabled People, if any \_\_\_\_\_

Level of Water Ski Experience Beginner \_\_\_\_\_ Intermediate \_\_\_\_\_ Advanced \_\_\_\_\_

**Please circle date(s) you will volunteer for 2009 Summer Skiing Unlimited**

**6/20 7/25 8/15 9/19**

CPR Training (optional) yes \_\_\_\_\_ no \_\_\_\_\_

Strong Swimmer (required if in water with participants) yes \_\_\_\_\_ no \_\_\_\_\_

If needed, are you willing to be assist in Base Camp (no swimming necessary) yes \_\_\_\_\_ no \_\_\_\_\_

Emergency Contact Name \_\_\_\_\_ Phone \_\_\_\_\_ Relationship \_\_\_\_\_

Volunteer's Physician \_\_\_\_\_ Phone \_\_\_\_\_

**As a volunteer with the "Skiing Unlimited" program, I realize that water skiing can be a dangerous sport. I hereby release the Society for Handicapped Children and Adults of Stanislaus County, Inc. (Society) and its staff and volunteers from all liability arising from participation in this activity.**

**I also grant permission to use my likeness in photographs, voice or words, in television, film, newspaper, and other media for the purpose of advertising or communication the purposes and activities of the Society and in appealing for funds to support the Society's activities.**

**I HAVE READ AND UNDERSTAND THIS AGREEMENT**

\_\_\_\_\_  
Signature (required) Date \_\_\_\_\_

<b>FOR OFFICE USE ONLY</b>	
___ Application	___ Hold Harmless
___ Background Check	

SOCIETY FOR HANDICAPPED CHILDREN AND ADULTS  
1129 8<sup>th</sup> St, Suite 101, Modesto CA 95354  
2009 WATER SKIING UNLIMITED VOLUNTEER  
Volunteer Background Check Authorization Form

I, \_\_\_\_\_ (applicant name) hereby authorize Society for Handicapped Children & Adults of Stanislaus County to obtain information pertaining to any charges and/or convictions I may have had for violation of municipal, county, state or federal laws. This information will include, but not be limited to, allegations regarding and convictions for crimes committed upon minors and will be gathered from any law enforcement agency of this state or any state or federal government, or from third-party providers of information originally obtained from law enforcement or court records.

I understand that I will be given an opportunity to challenge the accuracy or any information received that appears to implicate me in criminal activities. To facilitate this challenge, I will be told the nature of the information and the agency from which it was obtained. It will be my responsibility to contact that agency. I further understand that until the Society for Handicapped Children & Adults of Stanislaus County receives notification from that agency clearing me, my application will be deferred.

As an applicant for a staff/volunteer position, I hereby attest to the truthfulness of the representations I have made. Except as I have disclosed, I have not been found guilty of, or entered a plea of nolo contendere or guilty to any offense. Further, other than for the offenses I have disclosed, **I have not had a finding of delinquency or entered a plea of nolo contendere or guilty to a petition of delinquency under the juvenile laws of this state or any other state.**

**I understand that I must be truthful and, if any statement I have made is found to be false, I will be denied the position for which I am making application or, if already accepted, terminated from my position.**

\_\_\_\_\_ (Signature of Applicant)

\_\_\_\_\_ (Date)

**Full Name of the Applicant** \_\_\_\_\_  
(Please print carefully, including middle name)

**DOB:** \_\_\_\_\_ **Sex:** \_\_\_\_\_ **Race:** \_\_\_\_\_

**Soc. Sec. No.** \_\_\_\_\_

**Driver Lic. No.** \_\_\_\_\_

**State of Issuance** \_\_\_\_\_

**Date of Expiration** \_\_\_\_\_



## PARKS & RECREATION DEPARTMENT

3800 CORNUCOPIA WAY, SUITE C, MODESTO, CALIFORNIA 95358 (209) 525-6750 FAX (209) 525-6774

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### *HOLD HARMLESS AGREEMENT*

In consideration of the granting of permission by the County of Stanislaus to use the County facilities and to participate in the activities, I hereby assume all risk of personal injury to person or property received by me or arising out of the use of the County facilities and adjacent area.

Dated: \_\_\_\_\_

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

Address: \_\_\_\_\_

\_\_\_\_\_

Original - County Copy  
Copy - Participant Copy

Individual  
7010-47