



January 17, 2024

Dear Potential Coach,

I would like to thank you for your interest in coaching, assisting and/or volunteering for the City of Chester.

The Council of the City of Chester adopted a Volunteer Coaches Screening Policy in January of 2018. I have included a copy and the information needed from you for the screening.

Please read over the policy and complete the required information by the date listed. Those passing the Screening will be submitted for consideration for coaching/assisting/volunteering for the 2024 City of Chester Recreation League and/or the Next Level Program.

If you have any questions please feel free to contact my office at the number below. I appreciate your willingness to volunteer and your understanding in the need for the screening.

Sincerely,

A handwritten signature in cursive script that reads "Patti Carter".

Patti Carter,
Recreation Director, City of Chester

YOU MUST COMPLETE A COACHES SCREENING PACKET, PASS A BACKGROUND CHECK, ATTEND THE COACHES MEETING, ATTEND THE TEAM DRAFT MEETING, ATTEND THE SCHEDULING MEETING, HOLD PARENT MEETING AND FOLLOW ALL OF THE RULES OF THE LEAGUE.

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VOLUNTEER COACHES SCREENING POLICY

PURPOSE

It is the intent of this policy to establish certain guidelines for screening potential volunteers and volunteer coaches for the City of Chester Parks and Recreation Department. In an effort to protect our children we will be investigating the backgrounds and character of volunteers who will be coaching children involved in athletic programs sponsored by the Chester Parks and Recreation Department.

GENERAL

A. Participants 18 years of age or younger shall have at least one (1) approved coach or assistant coach present at each athletic activity, including practices and games. A coach becomes approved once the process described in this policy is completed.

B. Any person who has been found guilty, pled guilty, or pled no contest, regardless of adjudication, or has a pending charge pertaining to, any of the disqualifying offenses listed in this policy will be immediately disqualified from coaching (either as a head coach or an assistant coach) in any athletic program sponsored by the City of Chester Parks and Recreation Department. The Parks and Recreation Department also reserves the right to disqualify a person for any crime or activity that would be considered a potential risk or detriment to children and/or vulnerable populations. A coach who fails to comply with this screening policy shall be automatically disqualified.

C. This policy will apply to all youth sports coaches, head and assistant, participating in City of Chester sponsored recreational activities. If there is any doubt as to which coaches should be screened, the general rule is anyone who would potentially have unsupervised access to children on the team.

D. The screening will be done annually.

SCREENING PROCESS

1. The Parks and Recreation Department will provide each potential coach or assistant coach with a Volunteer Consent/Release Form. The form should be completed and returned to the Recreation Director's office by the deadline assigned to the form.

2. The Parks and Recreation department Staff will assign a deadline to submit the Volunteer Consent/Release Form to the Recreation Director. This is necessary to allow enough time to complete the screening.

3. The Chester Police Department will be conducting the background checks and will cross-reference the screening results with the disqualifying crimes listed in this policy. A pass/fail will be given to the Parks and Recreation Department based on the cross-reference. A pass grade for any coach that has zero disqualifying crime matches, a fail grade for any coach that has one or more disqualifying crime matches.

4. The Chester Parks and Recreation Department will conduct the character reference checks for all potential volunteers.

5. If it is determined by the Parks and Recreation Department that the potential coach is disqualified or that their services are not needed, the department shall notify the applicant via first class mail, or by telephone, or by both forms of notification.

VOLUNTEER COACHES SCREENING POLICY

PENDING CASES

Anyone who has been charged with any of the disqualifying offenses or anyone with a pending case will not be permitted to volunteer until the official adjudication of the case.

DISQUALIFYING CRIMES

If an applicant (1) has been convicted of, (2) has a charge pending against him or her in which it is alleged that he or she has committed any of the following crimes, or (3) has a record of a conviction of an equivalent offense in another state, the applicant will be disqualified from volunteering for coaching or assistant coaching positions with any program sponsored by the Parks and Recreation Department.

All Sex Offenses

Examples include, but are not limited to: child molestation, rape, sexual assault, sexual battery, sodomy, prostitution, solicitation, indecent exposure, etc.

All Felony Violence Offenses

Examples include, but are not limited to: murder, manslaughter, aggravated assault, kidnapping, robbery, aggravated burglary, etc.

All Felony offenses other than violence or sex within the past ten (10) years.

Examples include but are not limited to: drug offenses, child endangerment, etc.

All Misdemeanor Violence offenses within the past seven (7) years.

Examples include, but are not limited to: simple assault, battery, domestic violence, hit and run, etc.

Some Misdemeanor Alcohol offenses within the past five (5) years or multiple offenses in the past ten (10) years.

Examples include, but are not limited to: driving under the influence, drunk and disorderly public intoxication, etc.

All Misdemeanor Drug offenses within the past five (5) years or multiple offenses in the past ten (10) years.

Examples include, but are not limited to: simple drug possession, possession of drug paraphernalia, etc.

Any other misdemeanor within the past five (5) years that would be considered a potential danger to children or is directly related to the functions of that coach.

Examples include, but are not limited to: contributing to the delinquency of a minor, providing alcohol to a minor, etc.



VOLUNTEER COACHES SCREENING AND CONSENT

APPLICANT'S **FULL** LEGAL NAME (PRINT):

LAST	FIRST	FULL MIDDLE	MAIDEN

ADDRESS		E-MAIL ADDRESS	
CITY		STATE	ZIP
PHONE		CELL?	YES NO TEXT YES NO

CIRCLE ONE	MALE	FEMALE	PREFER NOT TO ANSWER
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DATE OF BIRTH		DRIVER'S LICENSE NUMBER		STATE ISSUED	
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Have you ever been convicted of a criminal *offense or have any pending criminal* charges against you?

*This refers only to felonies and misdemeanors; you do not need to include non-criminal traffic violations or municipal ordinance violations. Yes _____ (If yes, provide details on next page.) No _____

*Have you ever received deferred adjudication for an offense or otherwise been required to register as a Sex Offender under any state of federal statute? Yes _____ (If yes, provide details on next page.) No _____

This background check includes the following:

- Criminal history reference searches for felony and misdemeanor convictions at the county, state and federal levels of every jurisdiction where I currently reside or where I have resided during the past 10 years; and sex offender registry searches at the county, state and federal levels in every jurisdiction where I currently reside or where I have resided.
- Sex Offender Registry search and inquiries.
- Character reference inquiries.

I hereby authorize the City of Chester, the City of Chester Police Department, City of Chester Parks and Recreation Department and their agents to conduct the background check described above. In connection with this, I also authorize the use of law enforcement agencies and/or private background check organizations to assist the Chester Parks and Recreation Department in collecting this information.

I authorize this information to be obtained either in writing or via telephone in connection with my consent. 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.

To the best of my knowledge, the information provided in this Notice and Authorization and any attachments thereto is true and complete. I understand that any falsification or omission of information may disqualify me from coaching. By signing below I hereby provide my authorization to the City of Chester Parks and Recreation Department and its agents to conduct a criminal and character background check.

Print Name: _____

Date: _____

Signature: _____

DATE RECEIVED _____

January, 2018

MUST BE RETURNED TO RECREATION DIRECTOR'S OFFICE BY: FEBRUARY 16, 2024 AT 10 A.M.

VOLUNTEER COACHES SCREENING AND CONSENT

ANSWER THE FOLLOWING QUESTIONS.

- 1) DO YOU USE ILLEGAL DRUGS? YES ___ NO ___
- 2) HAVE YOU BEEN CONVICTED OF A FELONY WITHIN THE LAST 10 YEARS? YES ___ NO ___
- 3) HAVE YOU EVER BEEN CHARGED WITH NEGLIGENCE, ABUSE, ASSAULT, SEXUAL ASSAULT OR CRIMES INVOLVING VIOLENCE OR THREATS OF VIOLENCE? YES ___ NO ___

I UNDERSTAND THAT:

- I MUST COMPLETE A CRIMINAL BACKGROUND AND CHARACTER REFERENCE IN ORDER TO BE CONSIDERED AS A VOLUNTEER COACH.
- I UNDERSTAND THAT, IF SELECTED, I MUST FOLLOW THE RULES AND GUIDELINES SET DOWN BY THE CITY OF CHESTER PARKS AND RECREATION DEPARTMENT.
- I UNDERSTAND THAT THE RELATIONSHIP BETWEEN THE CPARKS AND RECREATION DEPARTMENT AND THE VOLUNTEERS IS AN "AT WILL" ARRANGEMENT, AND THAT IT MAY BE TERMINATED AT ANY TIME WITHOUT CAUSE.

LIST THREE (3) CHARACTER REFERENCES THAT ARE NOT RELATED TO YOU.

REFERENCE #1:

REFERENCE #1 VERIFIED _____

NAME		PHONE	
ADDRESS	CITY	STATE	ZIP
HOW KNOWN:			

REFERENCE #2

REFERENCE #2 VERIFIED _____

NAME		PHONE	
ADDRESS	CITY	STATE	ZIP
HOW KNOWN:			

REFERENCE #3:

REFERENCE #3 VERIFIED _____

NAME		PHONE	
ADDRESS	CITY	STATE	ZIP
HOW KNOWN:			

DATE		COMPLETED BY	
BACKGROUND CHECK	<input type="checkbox"/>	SEX OFFENDER REGISTRY	<input type="checkbox"/>
		CRIMINAL HISTORY RECORDS	<input type="checkbox"/>

January, 2018

VOLUNTEER COACH REGISTRATION FORM

APPLICANT'S **FULL** LEGAL NAME (**PRINT**):

NAME		PHONE	
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MARK THE PROGRAM LEVEL YOU WOULD LIKE TO COACH/ASSIST: **C= COACH** **A=ASSIST**

WEE-BALL	TODDLER	T-BALL	8UB	8US	10UB	10US	12UB	12US	14UB	14US

IF YOU ARE WANTING TO COACH OR ASSIST WITH SOMEONE IN PARTICULAR LIST THEIR NAME HERE:

I WANT TO BE HEAD COACH WITH THE FOLLOWING ASSISTANTS:

ASSISTANT #1		ASSISTANT #2	
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I WANT TO ASSIST WITH:

HEAD COACH		ASSISTANT #1	
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I WANT TO COACH NEXT LEVEL TOURNAMENT BALL:

HEAD COACH		ASSIST	
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ALL REQUESTS FOR COACHING AND ASSISTING WILL BE CONSIDERED IF BACKGROUND SCREENING IS PASSED. YOU WILL BE NOTIFIED IF SELECTED.

I AFFIRM THAT I HAVE READ THE ABOVE/ATTACHED AND THAT THE INFORMATION I HAVE GIVEN IS TRUE AND COMPLETE.

SIGNATURE: _____ DATE: _____

PRINTED NAME: _____

<u>DO NOT WRITE IN BOX</u>	
Pass	_____
Fail	_____

<u>DO NOT WRITE IN BOX</u>	
Head Coach	_____
Assistant Coach	_____

CITY OF CHESTER, ILLINOIS
PARKS AND RECREATION
WAIVER/RELEASE FOR COMMUNICABLE DISEASES INCLUDING COVID-19
ASSUMPTION OF RISK / WAIVER OF LIABILITY / INDEMNIFICATION AGREEMENT
ADULT WAIVER AND RELEASE OF LIABILITY

READ BEFORE SIGNING

In consideration of being allowed to participate in any way in the City of Chester Parks and Recreation's Rec Ball League athletic sports program, related events and activities, the undersigned acknowledges, appreciates, and agrees that:

1. The risks of injury and illness (ex: communicable diseases such as MRSA, influenza, and COVID-19) from the activities involved in this program are significant, including the potential for permanent paralysis and death, and while particular rules, equipment, and personal discipline may reduce these risks, the risks of serious injury and illness do exist; and,
2. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my participation; and,
3. I willingly agree to comply with the stated and customary terms and conditions for participation. If, however, I observe any unusual significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the City of Chester Recreation Director immediately; and,
4. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE AND HOLD HARMLESS the City of Chester, Illinois, their officers, officials, agents, and/or employees, other participants, volunteers, sponsoring agencies, sponsors, advertisers, and if applicable, owners and lessors of premises used to conduct the event ("RELEASEES"), WITH RESPECT TO ANY AND ALL INJURY, ILLNESS, DISABILITY, DEATH, or loss or damage to person or property, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE, to the fullest extent permitted by law.

UNDERSTANDING OR RISK

I understand the seriousness of the risks involved in participating in this program, my personal responsibilities for adhering to rules and regulation, and accept them as a participant.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

INITIAL _____

ADULT PHOTO RELEASE FORM

I, _____ (name of participant) hereby grant and authorize the City of Chester Parks and Recreation Department the right to take, edit, alter, copy, exhibit, publish, distribute and make use of any and all pictures or video taken of me to be used in and/or for any lawful promotional materials including, but not limited to, newsletters, flyers, posters, brochures, advertisements, fundraising letters, annual reports, press kits and submissions to journalists, websites, social networking sites and other print and digital communications, without payment or any other consideration.

This authorization extends to all languages, media, formats and markets now known or later discovered.

This authorization shall continue indefinitely, unless I otherwise revoke this authorization in writing.

I waive the right to inspect or approve any finished product in which my likeness appears, including written or electronic copy.

I agree that I have not been nor will I be compensated for this use of my likeness. I waive any right to royalties or other compensation arising or related to the use of the photograph(s).

I understand and agree that these materials shall become the property of City of Chester, Illinois.

I do hereby, fully release and forever discharge the City of Chester, including their officials, agents, volunteers, employees, and sponsors from all liability, petitions, and causes of action which I, my heirs, representative, executors, administrators, or any other persons may make while acting on my behalf or on behalf of my estate, arising out of, connected with, or in any way associated with the use of the photograph(s) or video.

INITIAL _____

Participant Name: _____ Participant Signature: _____

Date Signed: _____ Phone Number: (_____) _____