



Special Olympics
Washington

Volunteer Registration and Screening Process

Registration of all volunteers is a requirement of the organization's Special Olympics General Rules and a prerequisite for volunteer participation coverage through our insurance company. For purposes of clarification volunteers in Special Olympics fall in to two categories: Class A (volunteers who have regular close physical contact with athletes) or Class B (volunteers who have limited contact with athletes).

Screening is mandatory for all Class A volunteers whose duties require them to be in direct personal contact and/or alone with athletes (e.g. coach, assistant coach, chaperone, Unified Partner, private vehicle drivers; a position of trust, and/or those with fiscal or certain administrative responsibilities). Both a criminal background and sex offender check of Class A volunteers will be conducted through two separate agencies: (1) Washington State Patrol (2) a selected national vendor that includes the sex offender registry for each state.

Registration to be a volunteer with Special Olympics Washington (SOWA) is required whether you are Class A or Class B.

- 1) All prospective volunteers must complete the standard *Volunteer Registration Form*, which includes specific contact information, and other pertinent data (e.g. date of birth and driver's license information). You may also be asked to present valid proof of vehicle insurance, and photo identification. Teens 14-17 will need the signature of a parent/guardian as well as their own.
- 2) All applicants are asked on the *Volunteer Registration Form* to:
 - Sign a waiver giving permission to use the volunteer's name and likeness to promote and publicize the purposes of Special Olympics, and
 - list two references as part of their registration: (a) personal (b) school/church/employer/group---provide name, address, telephone phone number and relationship. Both references must be adults (space provided on *Volunteer Registration Form*).
- 3) If your involvement with Special Olympics Washington includes any of the following duties, you are classified as a Class A volunteer. You will be asked to submit to a criminal history background check through the Washington State Patrol and a national vendor which includes a sex offender registry. The screening process is conducted through the Special Olympics Washington's State Office and once clearance is approved, it is valid only for a two-year period of time.
 - Regular close physical contact with athletes
 - Authority over or supervision of athletes
 - A position of trust with the athletes
 - Handling substantial amounts of cash or other assets of the Program

All volunteers, whether Class A or Class B, when signing in to work at a particular venue site or event will be asked to enter their name and information on a *Disclosure Form* and provide a signature attesting to the disclosure statement. This is to ensure current data and proof of actual participation. Participation in a specific annual activity (i.e., fund raisers, Summer Games, Winter Games) requires completion of a new *Volunteer Registration Form* each year. No individual or group volunteering in support of SOWA is exempt from these requirements.

No volunteer may be actively involved in the training and competition of Special Olympics' athletes without having been screened through Washington State Patrol and a national database. If you have any questions regarding the clearance process, please contact the Special Olympics Washington State Office at 1-800-752-7559.



Volunteer Registration Form

Please print legibly and complete the entire form.

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Name _____ Birthdate: _____
First Name M.I. Last Name

Mailing Address _____

City _____ State _____ Zip Code _____

Fax _____ E-Mail _____

Day Phone (_____) _____ Night Phone (_____) _____

Employer Name or Group Represented: _____

Have you ever had your Driver's License suspended or revoked? Yes No

Do you use illegal drugs? Yes No

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Please list the name/address/phone number/relationship of two ADULT references: a) Personal and b) School/Church/Employer/Group

a) _____

b) _____

Check the box for your intended participation:

Winter Games Summer Games Summer Sports Classic Region Sports Events Other _____

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Summer Games Fort Lewis/Mcchord AFB/Military Installation Volunteers:

Driver's License #: _____

List your Vehicle Make & Year _____ Vehicle License #: _____

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Age Requirements for Volunteering:

- Children 10 and under are not eligible to volunteer, but are welcome to attend events as spectators. (Exception – Unified Partner participants may be 8 yrs. or older)
- Youth 11-13 are eligible to volunteer, for certain positions, if accompanied by parent/adult chaperone.
- ***Teens 14-17 are eligible to volunteer for certain positions.**
- Youth groups need to provide a minimum of one adult chaperone for every four youth.
- Adults are defined as 18 years of age or older.

*Signature of Teen Applicant (required)

*Signature of Teen Parent/Guardian (required)

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I give my permission to use my likeness, name, voice, or words in either television, radio, film, newspapers, magazines or other media, or in any form for the purpose of advertising or communicating the purposes and activities of Special Olympics Washington.

Signature of All Applicants

Date

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Applicants please read and sign the Applicant Disclosure Form Pursuant to Chapter 486 – Laws of 1987:

Pursuant to RCW 9A.73.085, I certify under penalty of perjury under the laws of the State of Washington that I have never been convicted of any crimes against persons as defined in Section 1 of Chapter 486, laws of 1987, and listed as follows: Aggravated murder; first or second degree murder; first or second degree kidnapping; first, second, or third degree assault; first, second, or third degree rape; first, second, or third degree statutory rape; first or second degree robbery; first degree arson; first degree burglary; first, second, or third degree manslaughter; first or second degree extortion; indecent liberties; incest; vehicular homicide; first degree promoting prostitution; communication with a minor; unlawful imprisonment; simple assault; sexual exploitation of minors; first or second degree criminal mistreatment.

Signature of Adult Applicant

Date

Applicants may also be required to show photo identification/vehicle drivers may be asked for proof of valid automobile insurance.

Western Washington Volunteers:
Special Olympics Washington
2150 N 107th, #220
Seattle, WA 98133-9009
Phone: 206-362-4949 or 800-752-7559
Fax: 206-361-8158

Mail or Fax form to:

Eastern Washington Volunteers
Special Olympics Washington
8911 W Grandridge Blvd #P
Kennewick, WA 99336-7126
Phone: 509-736-3120 or 800-442-2508
Fax: 509-736-3669