

CROOK COUNTY FAIR VOLUNTEER APPLICATION

1280 SE Main Street, Prineville, OR 97754

Mailing Address: PO Box 507, Prineville OR 97754

Phone: 541-447-6575; Fax: 541-447-3225

Email: cfgstaff@co.crook.or.us

Please complete ALL of the following information so that Fair personnel may contact you and get all necessary information to you in a timely manner.

The Fair is committed to producing a quality event for the community and relies heavily on volunteers. The Fair is also committed to making your volunteer experience a good one. In return, we hope you will make the same commitment to the community and your fellow volunteers by reporting to work at your scheduled time. All volunteers must complete this form. Your completed application will be reviewed carefully but its receipt does not imply that you will be chosen as a volunteer. **PLEASE PRINT LEGIBLY.**

NAME: _____ OTHER NAMES USED: _____

ADDRESS: _____
Street City State Zip

TELEPHONE NO. _____
Home Work Cell

EMAIL ADDRESS: _____

EMERGENCY CONTACT: _____
Name Relationship

TELEPHONE: _____
Home Cell

HEALTH: Are there any health or physical limitations that might affect your ability to volunteer or limit the type of activity you can perform? Yes _____ No _____

If yes, please briefly explain: _____

ABILITY TO VOLUNTEER: Times vary from 8 a.m. through 11:30 p.m. daily. Please indicate your availability by marking the times you are interested in volunteering on the corresponding day.

Monday	am to ____am	am to ____pm	pm to ____pm
Tuesday	am to ____am	am to ____pm	pm to ____pm
Wednesday	am to ____am	am to ____pm	pm to ____pm
Thursday	am to ____am	am to ____pm	pm to ____pm
Friday	am to ____am	am to ____pm	pm to ____pm
Saturday	am to ____am	am to ____pm	pm to ____pm
Sunday	am to ____am	am to ____pm	pm to ____pm

VOLUNTEER AREAS

Please mark the areas in which you are interested.

Admissions Information Booth Exhibit Buildings

Other Please describe: _____

Duties may not be available at all times and may change with the Fairground's needs.

Have you ever been convicted of a felony or misdemeanor? Yes ___ No ___

If yes, please explain: _____

(A conviction does not mean that you will not be offered a volunteer position. The nature of the conviction, the circumstances surrounding the conviction, and how long ago the conviction occurred are important considerations in determining your eligibility. State all of the facts so that a fair decision can be made.

Are you at least 14 years of age? Yes ___ No ___

HUMAN RESOURCES DEPARTMENT

If selected as a volunteer, I agree to: 1) be on time for scheduled duties; 2) accept the guidance and decision of the coordinators (Fair Board and Fairgrounds Manager); 3) carry out duties in a prompt and reliable manner; 4) notify the Fair of an inability to perform assigned duties as early as possible; 5) maintain smooth working relations and stay within the bounds of volunteerism; 6) maintain dignity and integrity of the Crook County Fair with the public; 7) honor confidential information; 8) not make statements to the press as that is the duty of the Fairground Manager and/or Fair Board; 9) act as a goodwill ambassador to the Fair; 10) and not participate in any fraudulent or unethical behavior.

For more information about the volunteer application process, please review the Crook County Volunteer Manual.

It is understood that as a condition of this volunteer application, you may be required to take a drug test and physical examination (if applicable), and complete the selection process as required by the Crook County Human Resources Department.

CONSENT TO CRIMINAL RECORD SEARCH

I hereby consent to have the Crook County Sheriff's Office investigate all criminal records in my name and any criminal records database. I am aware that information retrieved from such a search may affect the decision for volunteer status. Any information received will remain confidential.

By my signature below, I certify the information provided on and in connection with this form is true, accurate, and complete. I agree that an original, faxed, photocopy, or electronic form of this document will be valid the same as the original.

Dated this ___ day of _____, 20___.

Applicant's Signature

Parent/Guardian (if under 18 years old)

CROOK COUNTY IS AN EQUAL EMPLOYMENT OPPORTUNITY EMPLOYER