



**CHAPERONE
(Adult)
Information/Application
Confidential**
Please type or print

**Volunteers 18 and older must complete and return a background waiver to SOUT – no references needed.*

Name: _____
Last First

Title of Courtesy (examples: Mr./Mrs./Mr/Dr): _____ *DOB: _____ *Gender: _____

*Permanent Address: _____
Street City State Zip Country

Phone: _____ Fax: _____ E-mail: _____
Work/daytime Home/evening

Special Olympics Team Affiliation (if any): _____

Your Employer: _____

If you think your employer would like to know more about SOUT, whom should we contact?

Name: _____ Daytime Phone: _____

CODE OF CONDUCT

The Code of Conduct is not intended to interfere with the athlete's individual treatment plan

PLEASE READ BEFORE SIGNING

Statement of Purpose

The purpose of the Code of Conduct is to protect athletes from abuse, neglect, mistreatment and exploitation and to help ensure that each athlete is treated with the same respect and dignity that should be afforded every human being.

Human Dignity

Each individual is entitled to be treated with respect, dignity and equality. No individual, and in particular, no Special Olympics athlete, should be spoken of or to in a degrading or humiliating fashion. Youth, young adult and adult athletes should be accorded the same respect that any individual of their chronological age would be afforded. Each athlete, regardless of abilities, should be recognized for their accomplishments and for their unique abilities.

Protection from Abuse

- No athlete shall be subjected to any form of physical, sexual or emotional abuse. No individual or volunteer shall abuse, sexually abuse, sexually exploit or mistreat any athlete or cause physical injury to any athlete. All injuries to athletes will be reported to the proper medical personnel immediately.
- No person by acting, ailing to act, encouragement to engage in or failure to deter from will cause any athlete to be subject to abuse, sexual abuse or sexual exploitation, neglect, exploitation or mistreatment.
- No person shall engage any athlete, as an observer or participant, in sexual acts.
- No person shall make unjust or improper use of an athlete or their resources for profit or advantage.

Acknowledgement of Responsibilities

- I have read and acknowledge that I understand and will abide by the Code of Conduct.
- I grant Special Olympics Utah permission to use my likeness, voice and words in television, radio, film or in any form to promote activities of Special Olympics Utah.
- I acknowledge that I will be using facilities at my own risk and I, on my own behalf, hereby release, discharge, and indemnify Special Olympics Utah from all liability for injury to person or damage to my property.

- The information that I have provided may be verified, and I give permission to Special Olympics Utah to make inquiry of others concerning my suitability to act as a Special Olympics volunteer.
- In the course of volunteering for Special Olympics, I understand I may be dealing with confidential information and I agree to keep said information in the strictest confidence.
- The relationship between Special Olympics and volunteers is an 'at will' arrangement that may be terminated at any time without cause by either the volunteer or Special Olympics.
- I understand that it is my responsibility to notify Special Olympics Utah of any change of information provided in this application during the time I serve as a Special Olympics volunteer. _____ initial.
- I affirm that I have read and understand the above and that the information I have given is true and complete.

Signature _____ Date: _____

I acknowledge that I have seen and understand the Volunteer Orientation Video. _____ initial.

Please answer the following questions:

- | | |
|--|------------|
| | Circle One |
| 1) Do you use illegal drugs? | Yes No |
| 2) Have you ever been convicted of a criminal offense? | Yes No |
| 3) Have you ever been charged with neglect, abuse or assault? | Yes No |
| 4) Has your driver's license ever been suspended or revoked in any state? | Yes No |
| 5) Have you been convicted of reckless driving or of a D.U.I. in the past 5 years? | Yes No |

2 REFERENCES - FOR MINORS ONLY:

#1 - By signing below, I confirm the following:

1. I know _____ (applicant) in either a personal or professional capacity.
2. I am at least 18 years of age and not a legal guardian or relative of applicant.
3. I am not aware of any reason that the applicant should not be permitted to volunteer in behalf of Special Olympics Utah, and
4. I do not possess any information that would casuse me to believe the applicant would pose any undue risk to a Special Olympics Utah athlete or others who participate in Special Olympics Utah.

Signed: _____ Printed Name: _____
 Date: _____ Phone Number: _____

#2 - By signing below, I confirm the following:

5. I know _____ (applicant) in either a personal or professional capacity.
6. I am at least 18 years of age and not a legal guardian or relative of applicant.
7. I am not aware of any reason that the applicant should not be permitted to volunteer in behalf of Special Olympics Utah, and
8. I do not possess any information that would casuse me to believe the applicant would pose any undue risk to a Special Olympics Utah athlete or others who participate in Special Olympics Utah.

Signed: _____ Printed Name: _____
 Date: _____ Phone Number: _____

The above information is strictly confidential and will be used ONLY for Special Olympics sanctioned events.

Signature of Parent or Guardian if under 18 years old:
