

# YMCA of Harrison County



## Application for Employment

Please Note: Any employment offer from the YMCA of Harrison County is contingent on the successful completion of a National Criminal File Check, reference checks and drug screen.

Applicants for employment are considered without regard to race, creed, color, religion, sex, sexual orientation, age, disability, status as a veteran, Vietnam Era Veteran, or being a member of the Reserves or National Guard. Also, it is unlawful in Indiana to require or administer a lie detector test as a condition of employment or continued employment. An employer who violates this law shall be subject to criminal penalties and civil liabilities.

### Applicant Information (Please print answers to all questions. Incomplete applications will not be accepted.)

Last Name	First Name	M.I.	Today's date
Street address, Apt. #			
City	State	Zip Code	
Email address			
Telephone Number		Cell Phone Number	
Position(s) applying for			Date available

- Are you seeking (check all that apply)  Full-time  Part-time  Temporary employment  
 Day shift  Night shift  Weekends
- How many hours per week are you seeking? \_\_\_\_\_ Hourly rate desired: \$ \_\_\_\_\_
- What days are you available to work? \_\_\_\_\_
- Have you filed an application here before?  Yes  No If yes, when? \_\_\_\_\_
- Have you ever been employed here?  Yes  No (If yes, give dates) \_\_\_\_\_  
(last supervisor?) \_\_\_\_\_
- Are you currently employed?  Yes  No
- Do you have reliable transportation to work?  Yes  No
- Do you have a valid driver's license?  Yes  No
- Are you over the age of 18 years?  Yes  No (If no, you may be required to provide authorization to work)
- Do you have friends or relatives who work here?  Yes  No If yes, please provide names: \_\_\_\_\_
- How were you referred to our YMCA? Advertisement School/College Recruited Other: \_\_\_\_\_

(If you are hired, you will be required to furnish proof that you are eligible to work in the United States.)

## Education

	Name of school and location	Diploma, degree or certificate	Number of years completed
High School/GED			
College/University			
Vocational/Technical			
Other specialized training, apprenticeships, etc.			

## Work Experience

Starting with your present or last job, list names of all employers. Include military service, periods of unemployment, and verified work performed on a volunteer basis. Please write on the back if you need more space.

<b>Employer Name</b>	<b>Dates employed</b> From: ____ to: ____	<b>Work performed</b>
<b>Address</b>	<b>City/State</b>	<b>Telephone number</b>
<b>Job Title</b>	<b>Supervisor's name</b>	<b>Hourly rate/Salary</b>
Employer Name	Dates employed From: ____ to: ____	Work performed
Address	City/State	Telephone number
Job Title	Supervisor's name	Hourly rate/Salary
<b>Employer Name</b>	<b>Dates employed</b> From: ____ to: ____	<b>Work performed</b>
<b>Address</b>	<b>City/State</b>	<b>Telephone number</b>
<b>Job Title</b>	<b>Supervisor's name</b>	<b>Hourly rate/Salary</b>
Employer Name	Dates employed From: ____ to: ____	Work performed
Address	City/State	Telephone number
Job Title	Supervisor's name	Hourly rate/Salary

## Skills and Qualifications

1. What skills and/or additional training do you have that may be related to the job for which you are applying?

2. What machines or equipment can you operate that may be related to the job for which you are applying?

## Personal References

Please give three references who are not related to you and who are not previous employers:

Name	Email Address	Phone number

## Sealed Record Notice

An applicant for employment with a sealed record on file with the Commissioner of Probation may answer "no" with respect to inquiry herein relative to prior arrests, criminal court appearances or convictions. In addition, any applicant for employment may answer "no" with respect to any inquiry relative to prior arrests, court appearances, and adjudications in all cases of delinquency or as a child in need of services that did not result in a complaint transferred to the superior court for criminal prosecution.

### Criminal Convictions

1. Have you ever been convicted of a felony?  Yes  No
2. Have you ever been convicted of a misdemeanor in the last five years?  Yes  No
3. If you answered "Yes" to either question, please explain.  
(A conviction does not necessarily disqualify you from employment.)

Please read each statement carefully before signing.

I understand that:

- ▶ This employment application, or the granting of an oral interview, does not represent contract of employment or a promise of future benefits by the YMCA of Harrison County.
- ▶ If hired, my employment with the YMCA of Harrison County will be at-will in nature and may be terminated, with or without cause, at any time, by either your supervisor or by the YMCA of Harrison County.
- ▶ This written statement supersedes any and all oral representation made by agents and or representatives of the YMCA of Harrison County.

Agreement: I certify that the information on this Application is true, complete and correct. I hereby authorize the investigation of my past employment, education and activities. I release from all liability all persons, companies, and corporations supplying information. I understand that false answers or statements, or significant omissions made by me on this form shall be sufficient cause for denial of employment or discharge.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

# WAIVER AND RELEASE OF LIABILITY AGREEMENT

Please read this Waiver and Release of Liability Agreement carefully before you sign it.

This is a legal document which affects your legal rights.

I, \_\_\_\_\_, in consideration for being allowed to participate in health and fitness activities, including but not limited to the fitness center, aquatic center, sporting events, and other activities (the "Activities") at the Young Men's Christian Association of Harrison County, Inc. (the "Facilities" or "YMCA") located at 198 Jenkins Court NE, Corydon, Indiana 47112 (the "Building"), do hereby acknowledge, understand, and agree as follows:

1. I am aware that the Activities involve known and unknown risks, dangers, and hazards which can result in serious physical or emotional injury, paralysis, death, or damages to myself, property, or other personal injuries and that damages and injuries are a common and ordinary occurrence when engaged in the Activities. I understand that among other things, there is a strong risk of:

- (a) the failure of equipment belonging to myself, the YMCA, or others;
- (b) broken bones, sprains, head, neck and back injuries, torn ligaments, abrasions and bruises and other similar injuries as a result of falls or contact with other participants;
- (c) death as a result of drowning or brain damage caused by nearly drowning in pools or other bodies of water;
- (d) physical changes that may occur during physical activity including, but not limited to, abnormal blood pressure, fainting, disorders of the heart, and even heart attack, and;
- (e) the negligence, failure to act reasonably, and failure to exercise due care by the YMCA, employees, staff, agents, myself, or others.

**I UNDERSTAND THAT THERE IS ABSOLUTELY NO GUARANTEE OF MY SAFETY.** I acknowledge that I have been advised to consult with my physician before participating in any of the Activities and accept full responsibility for any failure to do so. I acknowledge that it is my sole responsibility to familiarize myself with the Facilities and any and all fitness equipment used in the Facilities and that no orientation program or initial instruction is required as a condition of my use of the Facilities. I understand that I may not be covered under any insurance held by the YMCA and the affiliates, successors, and assigns of the YMCA (collectively, the "**Released Parties**").

2. I hereby **RELEASE AND FULLY DISCHARGE** the Released Parties, any of their directors, officers, members, agents, employees, volunteers, staff, or independent contractors and their respective sureties, insurers, successors, assigns and legal representatives (collectively, the "Representatives") from any and all liabilities, claims, actions, damages, costs or expenses of any kind or nature, including reasonable attorneys' fees (whether incurred in anticipation of or at trial or in appellate or bankruptcy proceedings) which I may have against them arising out of or in any way connected to my participation in the Activities, use of equipment at the Facilities or presence at the Facilities, unless resulting from willful or wanton recklessness or an intentional tort of the Released Parties or any of their Representatives. I understand that **THIS RELEASE INCLUDES A RELEASE OF ANY CLAIMS BASED ON THE NEGLIGENT ACTIONS OR INACTIONS** of myself, of any of the Released Parties or their Representatives, any person present at the Facilities, or any equipment present at the Facilities.

3. I accept for myself full responsibility for any and all injuries or damages of any kind which may result from my participation in the Activities, use of equipment at the Facilities, or presence at the Facilities, and it is my intention to **INDEMNIFY AND HOLD HARMLESS** the Released Parties and any of their Representatives, from all liabilities, claims, actions, damages, costs or expenses of any kind of nature whatsoever, including reasonable attorneys' (continued)

fees (whether incurred in anticipation of or at trial, or in appellate or bankruptcy proceedings) which I or any other person may have against them arising from or as a result of my presence at the Facilities, my use of equipment at the Facilities, or my participation in the Activities, unless resulting froth willful or wanton recklessness or an intentional tort of the Released parties or any of their Representatives. I represent that I have adequate insurance to cover any injury or damage I may suffer or cause while participating in the Activities or else I agree to bear the costs of such injury or damage myself. I further represent that I have no medical or physical condition which could interfere with my safety in the Activities, or else I am willing to voluntarily assume, and bear the costs of, all risks that may be created, directly or indirectly, by any such condition.

**4. I HAVE CAREFULLY READ THIS AGREEMENT AND FULLY UNDERSTAND ITS CONTENT. I AM AWARE THAT BY SIGNING THIS RELEASE, I AM WAIVING CERTAIN LEGAL RIGHTS, INCLUDING, WITHOUT LIMITATION, THE RIGHT TO SUE THE RELEASED PARTIES OR THEIR REPRESENTATIVES.**

5. I am signing this Agreement freely and of my own accord, realizing it is binding upon myself, my children and other minors that I am responsible for, my heirs, attorneys-in-fact, executors, assigns, and other legal representatives.

6. I agree that this Agreement is intended to be construed and interpreted as broadly and inclusively as permitted by the laws of the State of Indiana, without regard to conflicts of laws principles. Every term and provision of this Agreement is intended to be severable. If any one or more of the terms and provisions of the Agreement is found to be unenforceable or invalid by a court of competent jurisdiction, that shall not affect the other terms and provisions of this Agreement, which shall remain in full force and effect.

7. I warrant that I am over eighteen (18) years of age, that I have read and fully understand this Agreement and the YMCA's Code of Conduct and that no oral representations, statements, or inducements have been made to me. This Agreement represents that entire agreement among myself and the Released Parties with respect to the subject matters contained herein. **If I am under eighteen (18) years of age, a parent or guardian will also need to sign this Agreement where indicated.**

8. I agree to abide by all rules and regulations that the YMCA or any other Released Party may impose regarding the use of the Facilities, use of equipment at the Facilities, and participation in the Activities.

9. I agree and understand that this is a continuing release that applies not only to my present participation in the Activities, use of equipment at the Facilities, and presence at the Facilities, but shall also apply to my future participation in any of the Activities, use of equipment at the Facilities, and presence at the Facilities.

10. I agree that should I or my successors assert any claim in contravention of this Agreement, the asserting party shall be liable for the expenses (including legal fees) incurred by the other party or parties in defending, unless the other parties are finally adjudged liable on such claim by a court of competent jurisdiction.

11. This Agreement shall not be modified orally, and a waiver of any provisions shall not be construed as a modification of any other provision herein or as a consent to any other provision herein or as a consent to any subsequent waiver or modification.

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

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

Printed Name: \_\_\_\_\_

\_\_\_\_\_  
Signature of Parent/Guardian (if under 18)