

**HENRY FORD COLLEGE  
ATHLETICS VOLUNTEER FORM**



**By signing this document, you are giving up legal rights, including the right to sue Henry Ford College. PLEASE READ CAREFULLY.**

I understand that as a Volunteer and/or Chaperone of Henry Ford College (HFC) I am subject to a criminal conviction history check to ensure the safety of all HFC students which may include minor aged students.

I understand that the information below is required by Henry Ford College to conduct a criminal conviction history check using the Michigan State Police Internet Criminal History Tool (ICHAT). I authorize Henry Ford College to utilize this information for the sole purpose of obtaining a conviction-only history file search. All information received will be held in confidence with results viewed only by the Henry Ford College Office of Human Resources.

Name: \_\_\_\_\_  
(Please Print)      Last Name      Maiden Name/Other      First Name      MI

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_      Sex: \_\_\_\_\_

Race: (Please choose one)

- ☐ White
- ☐ Black
- ☐ Asian/Pacific Islander
- ☐ American Indian/Alaskan Native
- ☐ Unknown/Other

Driver's License #: \_\_\_\_\_

Please list the sport and semester that you will be coaching below:

SPORT	ACADEMIC YEAR

- I agree to abide by all HFC Board policies and guidelines while on duty as a volunteer.
- I agree to give Henry Ford College the right to use ICHAT for the sole purpose of obtaining a conviction-only history file search.

**I will advise HFC Human Resource Department immediately if there is any change in my criminal history or change in any information that may be relevant to my volunteer duties.**

**Waiver of Liability, Assumption of Risk and Indemnity Agreement**

My participation is voluntary and I knowingly assume all such risks. In consideration of the enjoyment, personal satisfaction, and other valuable consideration I receive while volunteering, the sufficiency of which I hereby acknowledge for myself, my heirs, personal representative or assigns, **I hereby release, waive, discharge, and covenant not to sue Henry Ford College, its Board of Trustees, individually and/or collectively, appointed officials, directors and officers, employees, agents, or volunteers from any liability and all claims** including those resulting from the negligence of Henry Ford College, its Board of Trustees, individually and/or collectively, directors and officers, employees, agents, or volunteers resulting in bodily injury or personal injury, accidents, or illnesses ( including death) and property loss arising from my participation as a volunteer. I also agree to indemnify and hold harmless Henry Ford College, its

Board of Trustees individually and/or collectively, appointed officials, directors and officers, employees, agents, or volunteers from any liability and all claims, actions, suits, procedures, costs, expenses, damages and liabilities, including attorney's fees arising from my participation as a volunteer.

As a volunteer at Henry Ford College, I hereby authorize Henry Ford College to conduct investigation into my background, including criminal history, driving record, current and previous employment, educational background, medical history, military history, personal history, and to conduct any other investigations that it deems appropriate; and to make inquiries of and obtain information, from persons listed as professional references, persons who wrote letters of recommendation on my behalf, and other appropriate individuals. I request any custodian of the aforementioned information, including duly constituted law enforcement agencies or judicial officers or other appropriate persons, to furnish Henry Ford College with all information it may have pertaining to me and make available copies of documents in my personal record related to unprofessional conduct. I hereby waive and release any and all claims against Henry Ford College, **its Board of Trustees, individually and/or collectively, appointed officials, directors and officers, employees, agents, or volunteers, or board members acting on behalf of such entity who provides such information to Henry Ford College.** Further, I waive written notice of disclosure of records required under Section 6 of the Bullard Plawecki Employee Right to Know Act, MCL 423.506.

I have read this Waiver of Liability, Assumption of Risk and Indemnity Agreement and fully understand its terms. I further understand that **I am giving up substantial rights, including my right to sue.** I am signing this agreement freely and voluntarily, and intend by my signature below, to completely and unconditionally release harmless **Henry Ford College, its Board of Trustees, individually and/or collectively, appointed officials, directors and officers, employees, agents, or volunteers of all liability to the maximum extent permitted by law.**

**Assumption of Risks:** As a volunteer, I understand I am not an employee of Henry Ford College and therefore am not covered, or entitled to be covered with workers compensation insurance or any employee benefits, and further that Henry Ford College does not provide any hospital, medical or accident insurance for me and therefore I am personally responsible for any costs associated with injuries or illness I incur while participating in

\_\_\_\_\_.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name of Volunteer

**PLEASE HAVE SIGNATURE WITNESSED BY THE ATHLETIC DIRECTOR OR AN EMPLOYEE OF HUMAN RESOURCES.  
PHOTOCOPY OF DRIVER'S LICENSE MUST BE ATTACHED TO THIS FORM.**

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

\_\_\_\_\_  
Date

Witness Name: \_\_\_\_\_  
Please Print

Updated 5/8/19

**Please return to the Office of Human Resources  
Welcome Center, 5101 Evergreen Rd., Dearborn Michigan**