



Lake County Fair
Worker/Volunteer Application
Minimum 16 years old

Please Print:

Date of Application: _____

Social Security #: _____

SSN # is needed if you will make \$600+ - Please DO NOT include if sent online

Full Name: _____

Address: _____

City

State

Zip Code

Primary Contact #: _____

Secondary Contact #: _____

Email: _____

Birthdate: _____

Age: _____

Gender: _____

Person to Notify In Case Of Emergency: _____

Relationship to Applicant: _____ Phone #: _____

Are you 18 years of age or over? (Please circle) YES NO (If no, have your parent sign the application.)

If under 18, please have your parent/guardian sign: _____

Outside Work Crew/ Maintenance (Mid to Early July through 3rd week in August (DOES NOT INCLUDE CARNIVAL))

Inside Bldg. Work Crew (Late July thru Fair)

Gate Crew

Parking Crew

How did you learn about work/ volunteering at the Lake County Fair? _____

What specific skills, talents, etc. would you like us to be aware of? _____

Notice to Workers and Volunteers Regarding Limited Criminal History Check

To help ensure a safe environment, Lake County Fair will obtain a Limited Criminal History Check for each individual who is providing volunteer or paid services at our event or facility. A Limited Criminal History Check must be performed at the I.D. Badge Trailer before or during the Lake County Fair before everyone is able to work or volunteer with Lake County Fair. The Limited Criminal History Check is completed by the Lake County Sheriff's Department. Any information obtained from any type of criminal history check is confidential and shall not be released or disseminated.

AUTHORIZATION

I hereby voluntarily authorize Lake County Fair to obtain a Limited Criminal History Check to consider when making decisions regarding my services as a volunteer or worker at the Lake County Fair. I understand that I have rights under the Fair Credit Reporting Act.

Print Name (Last, First, Middle) _____

Date of Birth (MM/DD/YYYY) _____

Gender _____

Signature _____

Date _____

Driver License check (if driving a vehicle or golf cart) acknowledgement: By signing, I understand the above will be checked: _____

For Office Use Only: _____

Department: _____ Supt. Signature: _____

Years Worked: _____