



Confidential Kids America Volunteer Application

Name: _____ **Birthdate:** _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

Home Phone: _____ **Cell Phone:** _____

E-Mail Address: _____

Number years living in Coshocton County: _____

Previous Address: _____

City: _____ **State:** _____ **Zip:** _____

Driver's License Number: _____

Activity volunteering for at Kids America: _____

I release the above information and give consent to Kids America to conduct a background check.*

Signature

Date

*This information will be treated as confidential and for Kids America use only and will not be released to any other individuals.

Return by mail to: Executive Director
Kids America, Inc
P.O. Box 1177
Coshocton, OH 43812