



Rent-A-Kid

Town of Rochester

COMMUNITY CENTER/YOUTH DEPARTMENT

PO Box 65, Accord, NY 12404

Office Phone: (845) 626-2115 • Fax (845) 626-0141 • Youth Center Phone (845) 626-3053

Youthcommission@hvc.rr.com

ASHLEY SWEENEY, DIRECTOR

RITA HARKINS/BETHANY DENNIN, ASSISTANT DIRECTORS



This program does not deny services to participants regardless of race, creed, color, national origin, sex, or disability.

REGISTRATION FORM

RECEIVED

Today's Date: _____

Name: _____

Address: _____

City/ Town/ State/ Zip: _____

Age _____ Date Of Birth: _____ Gender: _____ School: _____

Ethnicity: White ___ Black ___ Hispanic ___ Native American ___ Asian ___ Other ___

Name Of Parents/ Guardians: _____

Telephone # (Home): _____ Cell: _____ Work: _____

Do you have any allergies? _____

Are you taking any medication? _____

Do you have any disabilities and/or health conditions that we should know about? _____

Days and hours available: _____

Circle Jobs preferred:

General House Cleaning

Pet-sitting

Cleaning garages

Babysitting

Greenhouse/Gardening

Snow shoveling

Mother's Helper

Basements/Attics

Yard Work

Cleaning Pools

Other preferences: _____

Special skills: _____

Will you need transportation? _____

YOUTH DEPARTMENT
TOWN OF ROCHESTER
845-626-2115

I, as parent/guardian of _____

Name of Child

do hereby recognize that the Rent-A-Kid Program is not an employer, but merely a referral service. (To help ensure your child's safety we advise all parents to meet with perspective employers. **We do not do a background check** on individuals calling for employment services.)

I further recognize that the Town of Rochester Youth Department is to receive no fee, compensation, and other benefit either from my child, or from any perspective employer for performing employment referral services.

In consideration of the Rent-A-Kid Program accepting my child for referral to various employment positions, I hereby agree to waiver and release the Town of Rochester Youth Department from any liability of any nature whatsoever resulting from my child's employment in a position or job secured by or through referral from Rent-A-Kid.

Parents:

The Youth Department strongly recommends that you meet with your child's perspective employer. The Youth Department is a referral service only. **We do not background check individuals calling for employment services.**

KEEP YOUR CHILD SAFE!

Thank you,

Ashley Sweeney, Youth Director

Signature of Parent or Guardian

Address (Street)

Address (City) (State) (Zip)

Phone number

Date