



## Volunteer Manual

Providing quality recreation opportunities  
for people to *enjoy life.*



Updated: 10/10/2013, 08/25/2015, 01/03/2017, 01/21/2019, 3/2/2021



Dear Volunteer,

Welcome to the Lombard Park District!

Thanks for your willingness to serve as a volunteer for the Lombard Park District. The Lombard Park District staff and Board of Park Commissioners recognizes the important role that volunteers play in the success and future of youth athletics and other park district programs in the community. Volunteers bring skills, enthusiasm and interest to Lombard Park District and help promote community involvement, spirit, and support. Volunteers help to promote the mission of the Lombard Park District “to provide people with quality recreation opportunities to enjoy life.”

The Lombard Park District staff and Board of Park Commissioners will continue to recruit, train, and support, retain and recognize its volunteers, without whom, some programs and events may not be possible.

Sincerely,

*Lombard Park District Board of Park Commissioners*

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## **Lombard Park District General Information**

Since 1927, the Lombard Park District has proudly provided opportunities for people to enjoy life. In fact, we've continued to improve and beautify our many parks as well as expand our recreation programs and special events in order to provide our residents with the best parks and recreation programs possible.

Today the Lombard Park District consists of 478 acres of land, including the world-renowned 8.5 acre horticultural showcase of Lilacia Park. A breathtaking floral display, Lilacia Park contains approximately 200 varieties of lilacs, and 50 varieties of tulips which bloom every spring. Lilacia Park is the site of "Lilac Time", a village tradition that dates back to the late 1920's and attracts visitors from throughout the Midwest and beyond. Still, the Lombard Park District is more than beautiful, well-maintained park sites its facilities are top-notch and attract thousands of residents and visitors each year.

## **Statement of Admissions**

All employees are expected to act and conduct themselves at all times in the best interest of the agency. When an accident occurs, no matter how insignificant it may seem to be, it is of the utmost importance never to presume or admit guilt or fault of any kind. Volunteers should never speculate on the cause(s) of the accident or injury or discuss any facts of the accident. Volunteers should cooperate with investigating authorities and with any investigation conducted by or on behalf of the agency. Any and all questions relating to an accident involving agency property and/or personnel shall be promptly directed to a department head, or agency spokesperson.

## **Public Relations**

Please remember that as a volunteer with the Lombard Park District, you are a direct reflection of the District and as a result anything you say or do will affect the District. You have the opportunity to make a difference in your community and in a child's life. Whether by passing on your knowledge and skill in a particular area, by being a role model, by teaching desirable personal, social and physiological skills, or by simply donating your time to help make a program or event possible, your participation and donation of time is invaluable. Thank you for volunteering!

## **Release of Liability/Waiver**

In order to volunteer for the Lombard Park District, participants must sign a release of liability/waiver. Volunteers under the age of 18 must have this waiver signed by a parent or guardian.



## **Criminal Background Check Policy**

All full-time and part-time Lombard Park District employees as well as District volunteers 18 years of age and older, shall be required to submit to periodic criminal background checks. The frequency of the background checks shall depend upon the employment or volunteer position. Employees may be required to submit fingerprints and/or other identification in order to facilitate such an investigation. Any employee or volunteer who refuses to submit to a criminal background check under this policy, or refuses to sign a consent form shall be subject to discharge. Convictions will not absolutely bar employment or volunteer status with the District, but will only be considered in relation to specific job requirements.

## **Volunteer Emergency Information**

In the event of any emergency, the Lombard Park District requires contact information for each of its volunteers.

## **Bloodborne Pathogens**

When a child has injured himself/herself and there is blood present, use extreme caution. Always wear latex gloves when there is the potential to have contact with the blood.

## **First Aid and Safety Tips:**

General Body Warm-Ups: Warm, pliable muscles are less likely to be strained. Action: Instruct athletes to gently stretch their muscles at first, then exercise helps prevent the body from overheating, but beware of the three most common heat disorders (cramps, heat exhaustion, and heat stroke) by learning to recognize their symptoms.

Fluid Replacement: Frequent fluid replacement before, during, and after exercise helps prevent the body from overheating, but beware of the three most common heat disorders (exhaustion, stroke and cramps) by learning to recognize their symptoms. Action: Promote bringing fluids and staying hydrated throughout practices and games.

Heat Stroke: The most serious heat-related illness. It occurs when the body becomes unable to control its temperature: the body's temperature rises rapidly, the sweating mechanism fails, and the body is unable to cool down. Signs can include: an extremely high body temperature (above 103 degrees Fahrenheit), red, hot, and dry skin (no sweating), rapid, strong pulse, throbbing headache, dizziness, nausea, confusion, unconsciousness. Action: Obtain emergency medical care immediately.

Heat Exhaustion: Can develop after several days of exposure to high temperatures and inadequate or unbalanced replacement of fluids. Those most prone to heat exhaustion are elderly people, those with high blood pressure, and those working or exercising in a hot environment.

Signs can include: Heavy sweating, paleness, muscle cramps, tiredness, weakness, dizziness, headache, nausea or vomiting and fainting. Action: If medical attention is not necessary, take the following steps: stop all activity and sit quietly in a cool place, drink clear juice or a sports beverage and do not return to strenuous activity for a few hours after the cramps subside because further exertion may lead to heat exhaustion or heat stroke. See medical attention for heat cramps if they do not subside in 1 hour.

Heat Cramps: Sudden, painful, muscle contractions often caused by acute loss of body fluids and mineral depletion through sweating or as the result of an acute blow. Action: Athletes should gently massage muscles. Replenish fluids.

Strains and Sprains: Muscle strains and sprains are common in athletics. Symptoms usually include pain, limited range of motion, swelling, and possible skin discoloration. Action: Contact an emergency medical technician to transport the athlete. In the meantime, carefully compress ice to the injured area and elevate it above the level of the heart to reduce swelling.

Dislocations and Fractures: While not always evident, the common symptoms are pain, deformed joint, and loss of function. Action: Obtain emergency medical care immediately. Do not move the athlete. Take care to keep the injured area immobilized.

Concussions: A Concussion is a type of traumatic brain injury caused by a bump, blow, or jolt to the head or by a hit to the body that causes the head and brain to move quickly back and forth. Participants who show or report one or more of the signs and symptoms listed below – or who simply say they just “don’t feel right” – after bump, blow, or jolt to the head or body may have a concussion or other serious brain injury. Concussion signs and symptoms may not show up for hours or days.

Signs Observed in Participants by Parents or Coaches: Appears dazed or stunned; forgets an instruction, is confused about an assignment or position, or is unsure of the game, score, or opponent; moves clumsily; answers questions slowly; loses consciousness (even briefly); shows mood, behavior, or personality changes; can’t recall events prior to or after a hit or fall.

Symptoms Reported by Children and Teens: Headache or “pressure” in head; nausea or vomiting; balance problems or dizziness, or double or blurry vision; bothered by light or noise; feeling sluggish, hazy, foggy, or groggy; confusion, or concentration or memory problems; just not “feeling right,” or “feeling down.”

Action for Possible Head Injury/Concussion: Remove participant from play, when in doubt, sit them out; notify parent; contact emergency medical care depending on the situation; individual should see healthcare provider for assessment and instructions. Do not try to judge the severity of the injury yourself.

Only a healthcare provider should assess a child or teen for a possible concussion. Concussion signs and symptoms often show up soon after the injury. But you may not know how serious the concussion is at first, and some symptoms may not show up for hours or days. The brain needs

time to heal after a concussion. An individual's return to school and sports should be a gradual process that is carefully managed and monitored by a healthcare provider.

To learn more about concussions, go to [cdc.gov/HEADSUP](http://cdc.gov/HEADSUP).

## **Emergency Response Procedures**

1. Administer first aid/CPR if trained to do so.
2. Contact local police and EMS.
3. Minimize further loss (if property related.)
4. Contact supervisor and provide him/her with all the details immediately available.
5. Notify employees at the site that an emergency exists.
6. Fill out the proper incident/accident report carefully to document the emergency and the response.
7. Cooperate with local emergency service and police personnel.
8. Continue to compile accurate information as quickly as possible.
9. Do not talk to the media.

Treat for shock

Maintain present body temperature

Keep calm

Keep talking to the injured person (not about injury)

Do not move the injured person

Try to make him/her as comfortable as possible.

## **Accident/Incident Reporting**

If a Lombard Park District staff member is not present, the volunteer must fill out an Accident/Incident Report for every accident they observe or that is reported to them. A seemingly minor injury could escalate into a more serious complication and all documentation is very important. If a supervisor is on duty, he/she will take care of completing the form. If the accident is serious or requires ambulance service, volunteers are required to complete a separate write-up in detail to submit to your direct supervisor within 24 hours of the accident. Phone your direct supervisor as soon as possible to explain the situation as well. Do not give the report to the injured participant to complete. The volunteer must complete the form. The volunteer should inform the injured party and/or parent or legal guardian, that all injuries should be referred to a qualified physician. When attending to an injured person, you should first determine if you need to call the paramedics (911). If the parents/guardians do not wish for the paramedics to be called they must initial the Accident/Incident Report.

## **Behavior Management**

Volunteers, coaches, parents, participants and spectators are expected to adhere to the NYSCA and Lombard Park District rules and philosophies as well as local, state and federal statutes at all times. Any individual who violates these rules will be subject to disciplinary action up to and including removal from the program.

Behavior contrary to Lombard Park District expectations will not be tolerated. The District reserves the right to limit coach/parent/participant participation in the youth athletic programs. Violation of any rules, regulations or expectations can and will result in the following: 1st offense = a minimum one (1) game suspension. 2<sup>nd</sup> offense = a minimum three (3) game suspension.

Depending on the severity of the violation, the District may pursue further action.

Any individual who has been administered a disciplinary action has the right to an appeal. This appeal must be in writing and received within 24 hours of the disciplinary action. The Park District will review this appeal in a timely fashion and all disciplinary action will stay in effect while the appeal is reviewed.

Appeals should be directed to:

Lombard Park District

ATTN: Joseph McCann, Director of Recreation

820 S. Finley Rd, Lombard, IL 60148

OR

[jmccann@lombardparks.com](mailto:jmccann@lombardparks.com)

## **Policy Prohibiting Discrimination and Harassment in the Workplace**

The Park District is committed to a working environment in which all individuals are treated with respect and dignity. Each individual has the right to work and volunteer in a professional atmosphere that prohibits discriminatory practices, including harassment. Therefore, the Park District expects that all relationships among persons in the workplace will be business-like and free of bias, prejudice and harassment.

It is the responsibility of each and every employee, officer, official, park commissioner, agent, volunteer, and vendor of the Park District as well as anyone using the Park District's facilities, to refrain from sexual and other harassment. The Park District will not tolerate sexual or any other type of harassment of or by any of its employees and elected officials. Actions, words, jokes, or comments based on an individual's sex, race, national origin, age, religion, sexual orientation, or any other legally protected characteristic will not be tolerated.

You are encouraged to immediately report any incident of discrimination, harassment, or retaliation in the workplace to your immediate supervisor so that the Park District can respond promptly and take appropriate action.

## **Mandated Reporter (1-800-25-ABUSE)**

As required by the Abused and Neglected Child Reporting Act, any person in his/her official capacity having reasonable cause to believe a child known to them may be an abused or neglected child shall immediately report or cause a report to be made to the Department of Child and Family Services (DCFS). Contact your supervisor to discuss your suspicions. All information will be maintained as confidential. Free online training: <https://mr.dcfstraining.org/>

## **Benefits of Volunteering**

As a Lombard Park District volunteer, you and your family are invited to an annual Staff & Volunteer Appreciation Party in your honor, typically held in August at Paradise Bay Water Park (437 E. St Charles Rd, Lombard).

## **Volunteer Medical Accident Insurance**

Volunteers are covered for accidental injuries to themselves while within the scope of their designated duties as a volunteer.

Volunteers are not covered under the Illinois Workers compensation statutes. The Illinois Supreme Court has ruled that persons not receiving pay for their services are not employees within the meaning for the Workers Compensation Act, and therefore not covered.

If a volunteer is injured while performing their volunteer duties the claim should first be processed through any health insurance or Medicare coverage the volunteer may have. (If the volunteer does not have insurance or Medicare or their insurance does not pay all expensed PDRMA does provide Volunteer Medical Accident Insurance, with certain limitations. The policy provides \$5,000 in medical expense coverage for injuries incurred while the volunteer is performing volunteer duties. There is no coverage for lost wages from another job. The coverage is excess over all other insurance the volunteer may have. The volunteer will be required to sign an affidavit attesting to what other insurance he/she may have, and provide bills and copies of explanations or benefits before this policy will cover any outstanding bills or out of pocket expenses.



## **VOLUNTEER ACKNOWLEDGEMENT/WAIVER**

I have read the Volunteer Manual and Job Description and will perform the duties agreed upon. I understand the Park District reserves the right to decline my services based on the results of a background check that includes a review of criminal convictions.

### **IMPORTANT INFORMATION**

The Lombard Park District is committed to conducting its recreation programs and activities in the safest manner possible and holds the safety of participants in the highest regard. Participants and/or parents registering in recreation or volunteer programs must recognize that there is an inherent risk of injury when choosing to participate. The Lombard Park District continually strives to reduce such risks and insists that all participants follow safety rules and instructions.

Due to the difficulty and high cost of obtaining liability insurance the providing agency requires the execution of the following Waiver and Release. Thank you for your cooperation.

### **WAIVER OF LIABILITY**

I recognize and acknowledge that there are certain risks of physical injury and I agree to assume the full risk of any injuries, damages or loss that I may sustain as a result of participating in any and all activities connected or associated with my volunteer duties.

I hereby freely consent and agree to waive and relinquish all claims I may have as a result of my participation against the District and its officers, agents, servants and employees.

I do hereby release and discharge the District and its officers, agents, servants and employees from any and all claims from injuries damages or loss which I may have or which may accrue to me on account of participation in programs or activities.

I further agree to indemnify and hold harmless and defend the District and its officers, agents, servants and employees from any and all claims resulting from injuries, damage and losses sustained by me or arising out of, connected with or in any way associated with the programs or activities.

In the event of an emergency, I authorize District officials to secure from any licensed hospital, physician, and /or medical personal any treatment deemed necessary for my or my children's immediate care and agree that I will be responsible for payment of any and all medical services rendered.

I have read and fully understand the above Details, Waiver and Release of all Claims and Permission to Secure Treatment

Participant's Name (please print) \_\_\_\_\_ Date \_\_\_\_\_

Participant's Signature \_\_\_\_\_

Parent / Guardian's Signature (if necessary) \_\_\_\_\_



## Lombard Park District National Background Screening Consent Form

Applicant's **Legal** Name (printed) \_\_\_\_\_

Social Security Number \_\_\_\_\_ Date of Birth \_\_\_\_\_

Applicant's Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

I, \_\_\_\_\_, authorize and give consent for the above named organization to obtain information regarding myself. This includes the following:

- Local & National Criminal background records/information
- All 50 State Sex Offender Registries
- Full Address Trace
- Social Security Verification

I the undersigned, authorize this information to be obtained either in writing or via telephone in connection with my application. Any person, firm or organization providing information or records in accordance with this authorization is released from any and all claims of liability for compliance. Such information will be held in confidence in accordance with the organization's guidelines.

A criminal report may be obtained at any time after receipt of your authorization and, if you are approved, throughout your volunteering.

I understand that my volunteering as a \_\_\_\_\_ with the Lombard Park District may be contingent upon the review of my background check to determine if my background would affect the position for which I am volunteering.

I understand that the Lombard Park District reserves the right to terminate, modify or limit my volunteering relationship subsequent to receipt and review of my background check.

Print Name: \_\_\_\_\_ Date: \_\_\_\_\_

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

**EMERGENCY CONTACT  
INFORMATION**

**DATE**\_\_\_\_\_

**NAME**\_\_\_\_\_

**DATE OF BIRTH**\_\_\_\_\_

**STREET ADDRESS**\_\_\_\_\_ **APT**\_\_\_\_\_

**CITY**\_\_\_\_\_ **STATE**\_\_\_\_\_ **ZIP**\_\_\_\_\_

**PHONE**\_\_\_\_\_(\_\_\_\_\_)\_\_\_\_\_

**EMERGENCY CONTACT**\_\_\_\_\_ **RELATIONSHIP**\_\_\_\_\_

**AT**\_\_\_\_\_(\_\_\_\_\_)\_\_\_\_\_

**PLEASE NOTE:** Volunteer Acknowledgement – Waiver of Liability, Background Check Authorization, and Emergency Contact Information, must be completed, signed and returned to the Special Event Manager at 820 S. Finley Road, Lombard, IL 60148.

|   |  |                                    |          |  |
|---|--|------------------------------------|----------|--|
| 1 | Agency name  | Today's date                       |          |  |
| 2 | Date of incident (mm/dd/yyyy)  | Time of incident (hh/mm a.m./p.m.) |          |  |
| 3 | Name of person completing report   | Title of person completing report  |          |  |
| 4 | Business phone number  | Business email                     |          |  |
| 5 | How did the incident occur? (Provide a brief, factual description; do not speculate on fault, etc.)  |                                    |          |  |
|   |  |                                    |          |  |
|   |  |                                    |          |  |
| 6 | Name of the location (park, pool, community center; <i>Ex. Smith Pool, Johnson Community Center</i> ) or nearest intersection where the incident occurred.     |                                    |          |  |
|   |  |                                    |          |  |
| 7 | Is there an address for this location? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown                               |                                    |          |  |
|   | If yes, please provide the following:  |                                    |          |  |
|   | Street address _____   |                                    |          |  |
|   | City   | State                              | Zip code |  |
| 8 | Location (Specify the exact type of location/facility where injury occurred. <i>Ex. maintenance garage, sports field, aquatic outdoor, golf course, etc.</i> ) |                                    |          |  |
|   |  |                                    |          |  |
| 9 | Primary location (Specify exact location. <i>Ex. lap pool, cart storage, classroom, pavilion</i> )   |                                    |          |  |
|   |  |                                    |          |  |

## BODILY INJURY

**If an employee was injured, please submit the form for an Employee Injury (Form 04) type of incident.**

|    |   |   |                    |   |
|----|---|---|--------------------|---|
| 10 | Was a person injured? ( <i>Ex. patron, citizen, participant, volunteer</i> )  |   |                    | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown |
| 11 | If yes, please provide the following information:   |   |                    |   |
|    | Last name _____   |   | First name _____   |   |
|    | Address _____   |   |                    |   |
|    | City _____  | State _____   | Zip code _____     |   |
|    | Home phone # _____  | Work phone # _____  | Cell phone # _____ |   |
|    | Age _____   | Sex <input type="checkbox"/> Male <input type="checkbox"/> Female |                    |   |
| 12 | Is injured person an agency volunteer?  |   |                    | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown |
| 13 | Describe the injury (affected body part and type of injury; <i>Ex. contusion, bruise, laceration, sprain, break, etc.</i> ) |   |                    |   |
|    |   |   |                    |   |
| 14 | Did injured person make any statements?   |   |                    | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown |
|    | If yes, what did injured person say? _____  |   |                    |   |
|    |   |   |                    |   |

**15** Was first aid administered? ☐ Yes ☐ No ☐ Unknown

Name and position of person who administered first aid \_\_\_\_\_

What first aid was given? \_\_\_\_\_

Did first aid involve AED and/or CPR? ☐ Yes ☐ No ☐ Unknown

If yes, please submit a PDRMA post-AED form.

Were paramedic services offered?

Called and refused (at scene by patron) ☐ Yes ☐ No Offered and called ☐ Yes

Offered and refused ☐ Yes ☐ No Offered, refused, called by agency anyway ☐ Yes

Unable to respond and called ☐ Yes ☐ No

Were police called? ☐ Yes ☐ No If yes, please provide the following information.

Name of police department \_\_\_\_\_

Name of officer \_\_\_\_\_

Do you expect this person to submit a claim? ☐ Yes ☐ No ☐ Unknown

## PROPERTY DAMAGE

**16** Was property damaged as a result of this accident/incident? ☐ Yes ☐ No ☐ Unknown

**17** If yes, how was the person involved in the accident/incident?

Owner of property adjacent to park district ☐ Patron ☐

Vehicle owner ☐ Other ☐

**18** Last name (or business name) \_\_\_\_\_ First name (not necessary if business name) \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_ Phone number \_\_\_\_\_

Describe the property damage \_\_\_\_\_

## WITNESS INFORMATION

**19** If there was a witness(es) to the accident/incident, please provide the following information:

Last name \_\_\_\_\_ First name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_ Phone number \_\_\_\_\_

**20** Did witness make any statements? ☐ Yes ☐ No ☐ Unknown

If yes, what did witness say? \_\_\_\_\_

**21** Where was witness when the accident/incident occurred? \_\_\_\_\_



## **Lombard Park District Youth Sports Coach**

### **Job Summary:**

The Youth Sports Coach is responsible for the instruction and supervision of the sports team members.

### **Qualifications:**

Minimum 16 years of age, high school graduate preferred. Must be willing to donate at least two hours of time each week.

**Reports To:** Program Manager- Athletics

**Department:** Recreation

**Type of Position:** ☐ Full-time ☐ Part-time ☐ Exempt ☒ Volunteer ☐ Nonexempt

### **Essential Functions and Responsibilities**

#### **A. General Administration**

1. The Youth Sports Coach in all of our youth sports programs must pass through a preliminary interview process with the Program Manager and/or League Coordinator. If accepted, they will be expected to attend coaches' certification in their chosen sport at the first opportunity.
2. The Youth Sports Coach will be expected to attend all league meetings as scheduled.
3. The Youth Sports Coach will be required to adhere to all league and Park District guidelines as they apply to their program.
4. Coaches are responsible for all aspects of team organization; uniforms, rescheduling, etc. and will be expected to handle all delegation of duties.
5. Coaches are a role model for their players and are responsible for the behavior of players, parents, assistants and, most importantly, themselves at all times.

#### **B. Safety, Health, and Loss Control**

1. Support, promote, and make recommendations regarding all safety, health, and loss control policies.
2. Be familiar with the Volunteer Manual.
3. Be familiar with the safe operation of any equipment necessary in accomplishing required tasks.
4. Responsible for providing all injury, illness, and health information required by Lombard Park District in its effort to assign tasks within an individual's capacity to prevent potential injury or illness.

5. Responsible for notification of injury/illness relating to a task assigned as describe in the Volunteer Manual.

## **Marginal Considerations**

1. Knowledge of Sport

## **Essential Functions**

1. Skill development
2. Line-up preparation and implementation
3. Knowledge of rules
4. First aid skills
5. Attend coaches training

## **Psychological Considerations**

1. Must be able to work well with children and adults.
2. Public speaking ability/communication.
3. Must be able to control temper and appropriately interact with participants, parents, spectators, officials, coaches, and staff.
4. Strong sense of sportsmanship and fair play.

## **Physiological Considerations**

1. Exposure to rigorous activity.
2. Physically able to conduct practices and games.
3. Able to perform skills needed to teach the sport.

## **Environmental Considerations**

1. Exposure to the elements (sun, grass, dust) for long periods of time.

## **Cognitive Considerations**

- 1 Good organizational skills.
2. Knowledge of sports and teaching ability in sports.
3. Knowledge of rules for sports teaching.

## **Lombard Park District Volunteer**

### **Job Summary:**

The volunteer is responsible for performing duties assigned by the Program Manager. Assigned duties vary depending on events/programs. Volunteer must possess excellent customer service skills.

### **Qualifications:**

Outgoing personality and quality customer service skills.

**Reports To:** General Recreation Program Manager      **Department:** Recreation

**Type of Position:** ☐ Full-time ☐ Part-time ☐ Exempt ☒ Volunteer ☐ Nonexempt

### **Essential Functions and Responsibilities**

#### **A. General Administration**

1. Communicate with public, staff, and participants in a professional manner.
2. Complete duties as assigned.
3. Demonstrate leadership qualities.
4. Attend required training and meetings.
5. Must wear professional attire or what is appropriate for event/program.
6. Must pass a background check before volunteering.
7. Schedule varies depending on the event/program.

#### **B. Safety, Health and Loss Control**

1. Support, promote, and make recommendations regarding all safety, health, and loss control policies as adopted by the Park District.
2. Be familiar with the Volunteer Manual.
3. Be familiar with the safe operation of any equipment necessary in accomplishing required tasks.
4. Responsible for providing all injury, illness, and health information required by the Lombard Park District in its effort to assign tasks within an individual's capacity to prevent potential injury or illness.

### **Essential Functions**

1. Greet customers/participants.
2. Monitor safety.

## **Psychological Conditions**

1. Ability to manage and instruct participants.
2. Ability for follow instructions.

## **Physiological Considerations**

1. Prolonged standing, depending on event/program

## **Environmental Considerations**

1. Ability to work in various weather conditions.

## **Cognitive Considerations**

1. Leadership qualities
2. Safety awareness
3. First-aid ability
4. Customer service skills
5. Problem solving

## **Requirements**

1. Mature and positive attitude.
2. Ability to communicate effectively.
3. Certification in First Aid, CPR, and AED desired.

# PARK & FACILITY AMENITIES

|  | ACRES | MAP # | AQUATIC FACILITY | BASEBALL FIELD | BASKETBALL COURT | BOATING (permit req'd) | FITNESS CENTER | FISHING | FOOTBALL FIELD | FRISBEE GOLF | GOLF-9 HOLES | HORTICULTURAL AREA | ICE SKATING | NATURAL AREA | PLAYGROUND | PICNIC AREA (reservable) | RENTAL FACILITY | RESTROOM | SAND VOLLEYBALL | SHELTER (reservable) | SKATE PARK | SLEDDING | SOCCER FIELD | SOFTBALL FIELD | SPLASH / SPRAY PARK | TENNIS COURT | WALKING PATH | WETLAND |
|--|-------|-------|------------------|----------------|------------------|------------------------|----------------|---------|----------------|--------------|--------------|--------------------|-------------|--------------|------------|--------------------------|-----------------|----------|-----------------|----------------------|------------|----------|--------------|----------------|---------------------|--------------|--------------|---------|
| Babcock Grove Memorial Garden<br>Park Rd. & Washington Blvd. | 0.48  | 1     |                  |                |                  |                        |                |         |                |              |              |                    |             |              |            |                          |                 |          |                 |                      |            |          |              |                |                     |              |              |         |
| Broadview Slough<br>Broadview Ave. & Crystal Ave.            | 19.8  | 2     |                  |                |                  |                        |                |         |                |              |              |                    |             |              |            |                          |                 |          |                 |                      |            |          |              |                |                     |              |              |         |
| Crescent Tot Lot<br>442 Crescent Blvd.                       | 0.75  | 3     |                  |                |                  |                        |                |         |                |              |              |                    |             |              |            |                          |                 |          |                 |                      |            |          |              |                |                     |              |              |         |
| Eastview Terrace<br>S. Charlotte St. & Eastview Terr.        | 0.53  | 4     |                  |                |                  |                        |                |         |                |              |              |                    |             |              |            |                          |                 |          |                 |                      |            |          |              |                |                     |              |              |         |
| Edson Park<br>W. Morris Ave. & S. Edson Ave.                 | 0.34  | 5     |                  |                |                  |                        |                |         |                |              |              |                    |             |              |            |                          |                 |          |                 |                      |            |          |              |                |                     |              |              |         |
| Four Seasons<br>Finley Rd. & 16th St.                        | 39.0  | 6     |                  |                |                  |                        |                |         |                |              |              |                    |             |              |            |                          |                 |          |                 |                      |            |          |              |                |                     |              |              |         |
| Lilacia Park<br>150 S. Park Ave.                             | 5.89  | 7     |                  |                |                  |                        |                |         |                |              |              |                    |             |              |            |                          |                 |          |                 |                      |            |          |              |                |                     |              |              |         |
| Lombard Common<br>433 E. St. Charles Rd.                     | 49.3  | 8     |                  |                |                  |                        |                |         |                |              |              |                    |             |              |            |                          |                 |          |                 |                      |            |          |              |                |                     |              |              |         |
| Lombard Golf Course<br>2400 W. Butterfield Rd.               | 64.0  | 9     |                  |                |                  |                        |                |         |                |              |              |                    |             |              |            |                          |                 |          |                 |                      |            |          |              |                |                     |              |              |         |
| Lombard Lagoon<br>430 Marcus Dr.                             | 10.8  | 10    |                  |                |                  |                        |                |         |                |              |              |                    |             |              |            |                          |                 |          |                 |                      |            |          |              |                |                     |              |              |         |
| Madison Meadow<br>E. Madison St. & S. Ahrens Ave.            | 92.5  | 11    |                  |                |                  |                        |                |         |                |              |              |                    |             |              |            |                          |                 |          |                 |                      |            |          |              |                |                     |              |              |         |
| Madison Meadow Athletic Center<br>500 E. Wilson Ave.         | 5.79  | 12    |                  |                |                  |                        |                |         |                |              |              |                    |             |              |            |                          |                 |          |                 |                      |            |          |              |                |                     |              |              |         |
| Old Grove<br>Michelle Ln. & Lewis Ave.                       | 8.30  | 13    |                  |                |                  |                        |                |         |                |              |              |                    |             |              |            |                          |                 |          |                 |                      |            |          |              |                |                     |              |              |         |
| Paradise Bay Water Park<br>437 E. St. Charles Rd.            | 2.37  | 14    |                  |                |                  |                        |                |         |                |              |              |                    |             |              |            |                          |                 |          |                 |                      |            |          |              |                |                     |              |              |         |
| Southland<br>Grace St. & Central Ave.                        | 15.6  | 15    |                  |                |                  |                        |                |         |                |              |              |                    |             |              |            |                          |                 |          |                 |                      |            |          |              |                |                     |              |              |         |
| Sunset Knoll<br>820 S. Finley Rd.                            | 36.9  | 16    |                  |                |                  |                        |                |         |                |              |              |                    |             |              |            |                          |                 |          |                 |                      |            |          |              |                |                     |              |              |         |
| Sunset Knoll Recreation Center<br>820 S. Finley Rd.          | 0.61  | 17    |                  |                |                  |                        |                |         |                |              |              |                    |             |              |            |                          |                 |          |                 |                      |            |          |              |                |                     |              |              |         |
| Spray Park<br>S. Lincoln Ave. & W. St. Charles Rd.           | 0.32  | 17    |                  |                |                  |                        |                |         |                |              |              |                    |             |              |            |                          |                 |          |                 |                      |            |          |              |                |                     |              |              |         |
| Terrace View<br>Elizabeth St. & Greenfield Ave.              | 43.1  | 18    |                  |                |                  |                        |                |         |                |              |              |                    |             |              |            |                          |                 |          |                 |                      |            |          |              |                |                     |              |              |         |
| Vista Pond<br>Edgewood Ave. & Greenfield Ave.                | 10.4  | 19    |                  |                |                  |                        |                |         |                |              |              |                    |             |              |            |                          |                 |          |                 |                      |            |          |              |                |                     |              |              |         |
| Westmore Woods<br>E. Maple St. & S. Ahrens Ct.               | 21.2  | 20    |                  |                |                  |                        |                |         |                |              |              |                    |             |              |            |                          |                 |          |                 |                      |            |          |              |                |                     |              |              |         |

## EXPLORE OUR BRAND NEW INTERACTIVE MAP:

Using the camera function on your device, hover and click the pop-up to explore.





# DISTRICT MAP

