

VILLAGE OF PALMETTO BAY PARKS & RECREATION DEPARTMENT

<u>SWORN STATEMENT PURSUANT TO ORDINANCE 08-10,</u> <u>SECTION 26-33, THE SHANNON MELENDI ACT</u> FOR PROGRAMMING ENTITIES/VENDORS/ORGANIZATIONS

THIS FORM MUST BE SIGNED BY AN AUTHORIZED OFFICIAL AND SWORN TO IN THE PRESENCE OF A NOTARY PUBLIC.

1. This sworn statement is submitted to the Village of Palmetto Bay, Parks & Recreation Department

(hereinafter "VOPB-P&R") by: _____

(print individual's name and title)

For: ____

(print name of programming entity/vendor/organization submitting sworn statement)

Whose business address is _____

And its Federal Employer Identification Number (FEIN) is

If the programming entity /vendor/organization/CBO has no FEIN, include Social Security Number (SSN) of the individual signing this sworn statement.

2. I, ______, am duly authorized to make this sworn statement (Print individuals name and title)

On behalf of:

(Print name of programming entity/vendor/organization submitting sworn statement)

- 3. I understand that Ordinance 08-10 Shannon Melendi Act (hereinafter "Ord. 08-10") was passed and enacted by the Village of Palmetto Bay of the 7th day of July 2008; and that it is my responsibility on behalf of my organization to effectuate full compliance and execute an Affidavit swearing to said compliance.
- 4. I have been provided a copy of Ord. 08-10.

- 5. I understand that Ord. 08-10 requires that all programming entities/vendor/organizations/CBOs whose staff/volunteers/coaches/managers require physical presence on park property, shall secure a <u>nationwide criminal background check</u> (as defined in Ord. 08-10) of all existing child event workers/employees/volunteers whose duties require physical presence prior to performing their duties on park property owned or operated by the VOPB-P&R. I further understand the nationwide criminal background checks shall be conducted by a Professional Background Screener and shall include a report as to whether each child event worker, park vendor, staff member or volunteer is listed on the National Sex Offender Public Registry. I further understand that I shall, upon request, provide copies of background check documents to the VOPB-P&R or any law enforcement personnel with jurisdiction.
- 6. I certify that all child event workers/employees/volunteers/coaches/managers have proof of United States Citizenship or legal immigration status in the United States.
- I certify that ______has a Business (Print name of programming entity/vendor/organization) Tax license(s) to perform programming in Miami-Dade County and Palmetto Bay, Florida.
- 8. I understand that the failure to comply with the **<u>nationwide criminal background check</u>** as required in Ord. 08-10 may disqualify my programming entity/vendor/organization/CBOs from conducting business with the Village of Palmetto Bay, Parks & Recreation Department.
- 9. I hereby certify that the foregoing statement is true and correct and certify that the submission of this form to the Village of Palmetto Bay binds me and my programming entity/vendor/organization/CBOs to fully comply with the background screening requirements of Ord. 08-10.
- 10. Upon affixing my signature and execution of this document, I further agree to sign, execute and notarize the attached AFFIDAVIT swearing to said compliance; and submit concurrently with this document. I further understand that pursuant to Paragraph 8 above, failure to remit the subject AFFIDAVIT may disqualify my programming entity/vendor/organization/CBO from conducting business within Village of Palmetto Bay parks and/or property as described in he's/she's respective/governing User Agreement.

(Print Name)	(Signature)	Date
Sworn to and subscribed before me this	day o	f, 20
Personally known to me, or Produce	ed Identification.	
	(Type of ident	ification)
Notary Public – State of Florida	·	
My commission expires		
	(Print or stamped commissi	ioned name of notary public