



Under 18 Application
City of Panama City Beach
Parks & Recreation Department

PCB Parks & Recreation Approval/Denial

16200 Panama City Beach Pkwy, Panama City Beach, FL 32413 ● Office Ph. (850)233-5045 ● www.panamacitybeachparksandrecreation.com

Personal Information

Name: _____ D.O.B. _____ Age _____ M _____ F _____
 Last First Middle

Address: _____ / _____
 Street and Number Applicants Contact Number

City _____ State _____ Zip _____

Applicants Email _____ Driver's License / I.D. Number (If Applicable) _____ State _____

Parent/Guardian Information

Primary Guardian _____ / _____
 Last First Middle Phone

Secondary Guardian _____ / _____
 Last First Middle Phone

Parent/Guardian Email _____

Emergency Contact _____ / _____
 Last First Middle Phone

Applicant Duties

Please choose the position you are applying for.

- | | | |
|---|--|---|
| Official <input type="checkbox"/> | Spring Soccer <input type="checkbox"/> | Baseball <input type="checkbox"/> |
| Scorekeeper <input type="checkbox"/> | Fall Soccer <input type="checkbox"/> | Basketball <input type="checkbox"/> |
| League Coordinator <input type="checkbox"/> | T-ball/Lil Sluggers <input type="checkbox"/> | Miracle League <input type="checkbox"/> |
| Coach <input type="checkbox"/> | | |

Have you ever worked for the Panama City Beach Parks & Recreation Department in the past? YES _____ NO _____

If YES, Parks & Recreation Supervisor Name _____ Approximate Date/Yr. _____

Aquatics Aquatics Program: _____

Summer Camps Summer Camp: _____

Other Volunteer / Other: _____

Volunteering

Are you looking to get a certain number of volunteer hours for school, other programs, etc....? Yes _____ No _____

If YES, what is your reason/program you need volunteer hours for? _____

If YES, how many hours are you looking to accrue? _____

