

Caregiver Participation Form

Tualatin Hills Park & Recreation District (THPRD) requires all caregivers who are 18 years or older and will be providing support during any THPRD programs, to be background-checked. If you're contracting with a Direct Support Professional (DSP) from a local vendor, they must be recently background-checked by their employer.

This form must be completed at least two (2) weeks prior to the start of programs to ensure enough time to complete a background check and to make sure the program is able to adjust to accommodate an additional person.

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Personal Information		
NAME	DATE	THPRD #
PARENT OR GUARDIAN NAME (If applicable)		
PHONE	EMAIL ADDRESS	
PREFERRED CONTACT METHOD	PREFFERED LANGUAGE	
□Email □Phone	□English □ Spanish □Other:	
Please list any accommodation the participant may be bringing with their caregiver (i.e. equipment, service dog):		
Section A. Complete if a DSP is Providing Support and Can Provide a Clearance Letter		
PERSONAL AID NAME	EMPLOYER (If DSP)	
PHONE	EMAIL ADDRESS	
PREFERRED CONTACT METHOD	PREFFERED LANGUAGE	
□Email □Phone	☐ English ☐ Spanish ☐ Othe	er:
Please attach a copy of the DSP's Clearance Letter from their current employer. If you are unable to provide this letter, complete Section B.		
Section B. Complete If the Caregiver Can't Provide a Clearance Letter		
Friends and family are welcome to provide support to program participants. If this is the route you'd like to take, please have all potential caregivers scan the QR code to submit a volunteer application and THPRD will complete a background		
check.		
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Re-Application Reminder: This form must be completed by each caregiver annually.		
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Patron/Guardian Responsibility: Parents/guardians MUST inform THPRD and follow the steps listed above when a new personal aid will be attending the program.		
SIGNATURE D	ATE	
Out On the		