

INDIVIDUAL VOLUNTEER PARTICIPATION AGREEMENT

Volunteer's Name _____
Address _____ City _____ State _____ Zip _____
Home Phone (____) _____ Work Phone/Cell (____) _____
Date of Birth ____/____/____ E-Mail Address _____

Emergency Contact Information

Person(s) to contact if I become ill or injured while on volunteer assignment:

Name _____ Home Phone (____) _____ Work Phone/Cell (____) _____
Name _____ Home Phone (____) _____ Work Phone/Cell (____) _____
Name _____ Home Phone (____) _____ Work Phone/Cell (____) _____

Any other information you would like in our files in case of emergency.

I, _____, agree to volunteer my services to the Park and Recreation Department of the City of San Diego in the position of _____. I understand my volunteer work schedule to be the following days: _____ during the following hours: _____ for ____ months or until the project is completed. I certify that I have read and understand the Volunteer Position/Job Description and the Volunteer Job Risk Assessment for this volunteer position, and the rules and regulations applicable to the volunteer position and the City's Volunteer Program. I agree to abide by those rules and regulations. I further certify that I am capable of performing the duties set forth in the position description and know of no physical condition which would preclude the performance of those duties. If I cannot complete the project or otherwise meet my commitment, I will notify my supervisor immediately. I acknowledge that the City has extended its worker's compensation coverage to volunteers and I accept that coverage. I acknowledge that the City will defend and indemnify me in any claim or action arising from my actions that are within the scope of my duties as a volunteer. I further acknowledge that the City is not required to indemnify me against a claim for punitive damages except as authorized by the City Council pursuant to Government Code Section 825(b). I agree, however, to defend and indemnify the City in any claim of action arising from my actions that are outside the scope of my volunteer duties. Finally, I acknowledge that loss or damage to personal property used while providing volunteer services is not reimbursable under City regulations.

Date ____/____/____ Volunteer's signature _____

If the volunteer is a minor (17 years of age and under) a parental/legal guardian must also complete the following information.

I, _____, consent to allow my minor child or dependant _____ to participate in the City of San Diego's Volunteer Program on the terms and conditions set forth above. I have signed this agreement on behalf of _____ and certify that I am his/her parent or legal guardian.

Date ____/____/____ Parent/Legal Guardian's signature _____

If the volunteer is a City of San Diego employee, they must also complete the following information.

I, _____, agree to perform volunteer services for the City of San Diego's under the terms and conditions set forth above. I acknowledge and agree that the services I will provide pursuant to this agreement are outside the scope of my duties as an employee of the City of San Diego, and are not within my job classification and are separate and apart from any paid work responsibility with the City of San Diego.

Date ____/____/____ Volunteer's signature _____

Office Use Only:

Site _____ On Site Supervisor _____