

VOLUNTEER SERVICE AGREEMENT / ADULT

I,		, am at lo	east 18 years of and Neighbor	ld and agree to volunt hood Services of the	eer
I understand my sche	edule will be	as stated in Attachmen	nt 1.		
I understand that any changes to my schedule are subject to the approval, in advance, by Department Coordinator.					
by the City for my se	rvices as a v her persons;	lary or other compensa volunteer. Rewards or phowever, the City is not	prizes for volu	nteer service to the Ci	ty
covered under the C that my sole remedy volunteer services to the City's Workers'	City's Work of for any inj of the City, w Compensar	ourse and scope of my ers' Compensation sel jury that I may sustain which is covered by W tion self-insurance cover e for the injuries descr	lf-insurance. I n during the c orkers' Comp verage. I waive	also understand and ourse and scope of m ensation, shall be the	l agree iy rough
I also acknowledge as be terminated for any	nd agree tha reason or fo	t my services are provient no reason and at any	ded for the con time by the Ci	venience of the City a ty without notice or h	ind may earing.
Volunteer's Name (Please Print)		Date of Birth	Ethnic Group (optional)		
Mailing Address		City	State	Zip	_
Phone (day)	Phone (evening)		e-mail address		
Emergency Contact / Relationship			Emergency Contact Phone Numbers		
Volunteer's Signature			Signature of	of Adopt-A-Park Staff	_
Date Service Begins	Santa Teresa Foothills Neighborhood Association				
200 Fact Sa	into Clara Stream	How did you hear about Ad	opt-A-Park?	R (409) 200 (100	evised 7/05