

## AGREEMENT REGARDING INDIVIDUAL VOLUNTEER SERVICE WITH THE CITY OF SOAP LAKE

hereby volunteer my services to
erform only the services as outlined in the attached scope of volunteer work for the City of
pap Lake, Department of I understand I wil
ot be compensated for my work but I volunteer to do so in a responsible manner. If I decide
discontinue my volunteer service I will notify
nmediately.
urther, I hereby certify that I am capable of performing the duties as outlined in the
tached scope of volunteer work (check which applies):
) without accommodations or ( ) with the following accommodations:

In consideration of the City of Soap Lake giving me permission to perform these volunteer services, I agree to the following terms:

- 1. I understand that I am not to appear for volunteer service under the influence of any drugs or alcohol.
- 2. I will abide by all of the City of Soap Lake's policies regarding personal conduct while performing volunteer services.
- 3. I agree not to go beyond the scope of volunteer work agreed to without authorization.
- 4. Should an injury occur during the scope of my service, I understand that:
  - a. The City of Soap Lake has included my hours of volunteer service in the Washington State Department of Labor and Industries coverage for volunteer workers.
  - b. I understand that I am to report any on-the-job injury or illness, no matter how minor to Staff at Soap Lake City Hall.
  - c. I authorize any necessary emergency medical treatment that might be required for me in the event of physical injury and/or accident to me while participating in this program. YES \_\_\_\_\_ NO \_\_\_\_\_.

- 5. Depending on the scope of volunteer work the following policies may apply:
  - a. Driving
  - b. Accident Prevention
  - c. Machinery/Equipment Operation
  - d. Workplace Harassment
  - e. Alcohol, Drugs & Intoxicants
  - f. Internet & Other Workplace Communication Systems
- 6. I acknowledge that I have been trained on the above policies and understand them and/or have had the opportunity to ask any questions.
- 7. I consent to the City of Soap Lake performing a background check into my history in accordance with RCW 43.43.830-839 and waive any right of privacy I may have in such information for the limited purpose of considering it for determining my suitability as a volunteer. (To be used for volunteers who will have regularly scheduled, unsupervised access to children under sixteen years or age, developmentally disabled persons or vulnerable adults.)
- 8. I understand that I, or the City of Soap Lake, may terminated this agreement at any time without cause, that I am volunteering my services at will and may be asked to discontinue such without prior notice or reason.
- 9. I am fully aware that the work associated with being a volunteer involves certain risks of physical injury or death. Being fully informed as to these risks and in consideration of my being allowed to participate in the Volunteer Program, I hereby assume all risk of injury, damage and harm to myself arising from such activities or use of the City of Soap Lake's facilities. I also hereby individually and on behalf of my heirs, executors and assignees, release and hold harmless the City of Soap Lake, its officials, employees and agents and waive any right of recovery that I might have to bring a claim or a lawsuit against them for any personal injury, death or other consequences occurring to me arising out of my volunteer activities, except for those caused by the sole negligence of the City of Soap Lake.
- 10. I give permission for photos/videos taken of myself during volunteer activities to be used for publicity purposes without recompense.

This agreement will be in effect for the duration of my volunteer services beginning this date.

By signing this agreement, I acknowledge, and agree, to the terms stated in this agreement.	
Dated this day of	, 20
City of Soap Lake	Volunteer's Signature
	Address
	Phone Number
	Parent/Legal Guardian