



## **VOLUNTEER AGREEMENT-ORGANIZATION**

Our organization, the \_\_\_\_\_, will provide volunteers to perform only the services as outlined in the attached scope of volunteer work for the City of Soap Lake. We understand that we will not be compensated for our work but we will complete our volunteer duties in a responsible manner. If we decide to discontinue our volunteer services, our contact person (designated below) will notify the City Finance Director/Administrator.

We understand and agree that:

- None of the group is to appear for volunteer service under the influence of any drugs or alcohol.
- The City of Soap Lake has included our hours of volunteer service in the Washington State Department of Labor and Industries coverage for volunteer workers.
- Our organization will provide the City of Soap Lake with a roster of individual participants including the names, ages and hours worked.
- Our organization will report any injuries sustained by participants during their volunteer activities to the City of Soap Lake immediately upon occurrence. Notice will be provided on the Incident/Accident Report Form furnished by the City of Soap Lake.
- Our organization is responsible for directly supervising the activities of all the individuals in our group who will be doing volunteer work, and therefore, in consideration of our organization and members being permitted to perform services on City of Soap Lake property, our organization agrees to defend, indemnify and hold harmless the City of Soap Lake and its officials, employees and agents from any damage claim or lawsuit for injury, illness, damage or other loss of any kind to anyone including members of our organization that might arise out of our activities or the actions of any individuals of our group, except for injuries or damages caused by the sole negligence of the City of Soap Lake.
- Our organization has commercial general liability insurance of at least one million dollars to cover our activities. A copy of the certificate of insurance and the additional insured endorsement, naming the City of Soap Lake as an "additional insured," is attached.
- The City of Soap Lake may terminate this agreement at any time without cause, and we agree that we are volunteering our services at will and may be asked to discontinue such without prior notice or reason.

This agreement will be in effect for the duration of our volunteer services or one year, whichever is less, beginning on this date.

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
City of Soap Lake

\_\_\_\_\_  
Name of Organization

\_\_\_\_\_  
Authorized Signature on behalf of Organization

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Title

\_\_\_\_\_  
Address

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Email Address