

Short Term Volunteer Form



VOLUNTEER INFORMATION

LAST NAME		FIRST NAME	
CURRENT ADDRESS			
CITY		STATE	ZIP
EMAIL		PHONE	BIRTHDATE (MM/DD/YYYY)
EMERGENCY CONTACT		PHONE	RELATIONSHIP

ONE TIME VOLUNTEER PROJECT INFORMATION

PROJECT NAME		TODAY'S DATE (MM/DD/YYYY)	
STAFF MEMBER IN CHARGE		ESTIMATED VOLUNTEER HOURS	
PROJECT DESCRIPTION			
		To	
SIGNATURE OF OC PARKS STAFF		EFFECTIVE DATE	

VOLUNTEER GUIDELINES AND PROVISIONS

As a County of Orange volunteer, I understand that I am not an employee of the County of Orange, I am not covered by Workers' Compensation or the County's Memorandum of Understanding, and that my volunteer agreement may be cancelled at any time. I understand that only pre-authorized mileage or out-of-pocket expenses will be considered for reimbursement, and that if I use my personal vehicle for any County business, I must maintain insurance as required by law.

The County of Orange and its officers, employees and agents shall not be held liable for any death, injury or property damage claims arising from volunteer work. If any claim arises out of the foregoing, the volunteer shall defend, indemnify and hold harmless the County of Orange and its officers, employees and agents from same.

I hereby certify that all statements contained on this application are true to the best of my knowledge, and that by signing this agreement, I understand and agree to the above volunteer guidelines and provisions.

SIGNATURE	DATE
SIGNATURE OF PARENT OR GUARDIAN (IF UNDER 18)	DATE