



COUNTY OF SAN DIEGO DEPARTMENT OF PARKS AND RECREATION
GROUP OR SHORT TERM VOLUNTEER
PARTICIPATION AGREEMENT AND SIGN-IN SHEET



GROUP OR ORGANIZATION: _____ **LOCATION:** _____ **DATE:** ____ / ____ / ____ **ON SITE SUPERVISOR:** _____
ACTIVITY: _____

I agree to volunteer my services to the County of San Diego Department of Parks and Recreation. I understand this volunteer job will involve _____ (Description of job)
 _____ and that I will not be paid for doing this job.

I understand the potential risks or hazards of this job may include _____
 and that I understand that I must wear the following protective clothing: _____

I certify that I have read and understand the above-described job-duties and potential hazards / risks. I further certify that I am capable of performing these duties and know of no physical condition which would preclude my performing these duties. If I cannot complete the job or otherwise meet my commitment, I will notify my supervisor immediately.

I certify that I am NOT an employee of the County of San Diego. (If a County employee, an Individual Volunteer Participation Agreement must be attached.)

I acknowledge that the County has extended its workers' compensation coverage to volunteers, and I accept that coverage. I acknowledge that I will not perform any tasks that I am not trained to do. I acknowledge that the County will not reimburse me for loss of or damage to personal property used while providing volunteer services.

It is the responsibility of the Volunteer Group Leader to obtain signature from parents/legal guardians for volunteers under 18 years of age. A parent/guardian must be present at all times to supervise a volunteer who is younger than 13 years old.

I hereby authorize the County of San Diego ("County") to copyright, publish, use, sell or assign any and all photographic portraits or pictures, television spots, movie films, videotapes, and/or sound recordings, or any part thereof, the County may have taken or made of me or in which I or my child may be included in whole or in part.

Group Leader Signature _____ Group Leader (Print Name) _____ Date: ____ / ____ / ____

	PRINT NAME	ADDRESS	PHONE	VOLUNTEER SIGNATURE (OR PARENT/GUARDIAN)	HOURS WORKED
1					
2					
3					
4					
5					
6					

