



AGREEMENT FOR INDIVIDUAL VOLUNTEER SERVICES

This agreement is made, by and between the City of Lakewood, a municipal corporation of the State of Washington hereinafter referred to as the "City" and

_____ hereinafter referred to as the "Volunteer".

(print name)

Section I. PURPOSE: The purpose of this Agreement is to outline the responsibilities of the City in providing volunteer opportunities, and to create an understanding between the City and the Volunteer.

This Agreement shall apply to persons, voluntarily performing non-compensated services for the City, including but not limited to, practical work experience, recreational programs, senior programs, police programs, and academic internships.

Section II. AGREEMENT FOR NON-COMPENSATED SERVICES: The Volunteer agrees to abide by all relevant City policies and procedures and to perform the volunteer services in a safe, responsible manner in accordance with the description of services maintained by the City.

It is further understood that this Agreement shall not in any way constitute nor create an employer/employee relationship between the City and the Volunteer. The City shall not be responsible for, nor liable for, nor shall the applicant be eligible to receive, any compensation or benefits as a result of this Agreement EXCEPT for State Labor and Industries Industrial Insurance medical aid coverage.

In consideration for the City authorizing me to perform volunteer services, I understand that: *(Please initial the following)*

_____ I am prohibited from appearing for volunteer service while under the influence of any illegal drugs or alcohol. As a Volunteer, I agree to inform my supervisor at the beginning of my shift or assigned volunteer hours if taking any over-the-counter or prescription medications which may impair my ability to perform volunteer duties.

_____ I am not to have child(ren) with me, during my volunteer activities, that are under 14 years of age (excluding child participation in the program). If I do bring with me any child(ren) under 14 years of age **(which is a violation of this agreement unless they are participating in the program)**, I understand I will be held solely liable, and assume all risk of liability, for my child(ren)'s actions and agree to hold the City harmless from any and all such related claims against the City; except for injuries and damages caused by the sole negligence of the City. I also understand that I will be asked to withdraw from my volunteer duties for that period because of the presence of children under the age of 14 who are not participating in a specific program.

_____ I will abide by all City policies regarding personal conduct while performing volunteer services.

_____ I agree not to perform any act that is beyond the scope of the volunteer work agreement without written authorization from the City.

_____ I agree to be trained to perform any activity with which I am unfamiliar prior to performing any task. I also understand that it is my responsibility to familiarize myself with applicable policies and procedures prior to performing any task and to ask questions when necessary.

_____ Depending on the scope of volunteer work, the following policies may apply: Driving, Safety Procedures, Computer Operation, Dress Code, Anti Harassment, and Confidentiality.

_____ Should an injury occur during the scope of my service, the City has included my hours of volunteer service in the State Labor and Industries coverage for volunteer workers.

_____ I understand that I am to report any on-the-job injury or illness, no matter how minor, to my supervisor and/or the volunteer coordinator immediately.

Section III. TERMINATION: I understand that either I or the City may terminate this agreement at any time without cause, and that I am volunteering my services at the pleasure of the City and may be asked to discontinue such service without prior notice or reason.

Section IV. WAIVER & HOLD HARMLESS: I am fully aware that the work associated with being a City Volunteer involves certain risks of physical injury or death. Being fully informed of these risks and in consideration of my authorization to participate in the City's Volunteer Program, I hereby hold harmless the City and its officers, agents, and employees, or any of them from any and all claims, actions, suits, liability, loss, costs, expenses, and damages of any nature whatsoever, up to and including death or injury and any claims related to or arising out of my volunteer service activities.

Section V. LIABILITY COVERAGE: I understand that the City is insured through the Washington Cities Insurance Authority (WCIA) for liability coverage. Volunteers performing within the scope of their assigned duties as authorized by the City are afforded the same coverage as City employees under the City's liability coverage with WCIA. I am fully aware that a volunteer's intentional misconduct is not protected or covered by the City or WCIA.

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

Dated this _____ day of _____, 20_____.

By: _____
City of Lakewood

Volunteer's Signature

Address

City/State/Postal Code

Phone