



Kitsap County Parks and Recreation
VOLUNTEER REGISTRATION AND AGREEMENT

Volunteer Category:
(Please circle)

Stewardship Program
Docent

Adopt-A-Park
Special Project (Fair)

Volunteer Name: _____

Address: _____

City: _____ Zip: _____

Email address: _____

Daytime Phone: (____) _____ Nighttime Phone: (____) _____

Emergency Contact Name: _____ Telephone: (____) _____

I, _____, agree to serve as a volunteer of the Kitsap County Parks and Recreation Department, and possibly be transported to my work site in a County vehicle. I am 18 years of age or older. (Minors must have a parent or legal guardian complete and sign this Agreement). I hereby agree to the following:

A. COMPLIANCE WITH COUNTY RULES AND PROCEDURES

I agree as follows:

1. I will comply with the rules and regulations set forth by Kitsap County.
2. All work within Kitsap County Parks must be preapproved by Kitsap County.

B. VOLUNTEER'S RELEASE OF ALL LIABILITY

It is my desire and intention to perform voluntary services without compensation of any kind for the Kitsap County Parks and Recreation Department.

I am fully aware of the possible hazards of volunteering for the County and I am aware that in volunteering I may incur personal injury and/or property damage. I understand that my volunteer services may include a variety of physical hazards, including but not limited to, the use of tools, and extremely rugged, uneven and steep terrain.

I attest that I am physically fit, able, and qualified to participate in this volunteer activity. I am participating in these activities with knowledge of the risks involved and I hereby agree to accept any and all risks of injury or death.

I hereby release Kitsap County, its employees, officers, directors, and agents from any claims, lawsuits, or actions I, my heirs, or legal representatives may have for any personal injury and/or property damage I may incur as a result of my voluntary services except those damages caused by the sole negligence or willful misconduct of Kitsap County employees. I understand that, but for this release of any and all liability, the County would not accept my offer of volunteering service.

I HAVE READ AND VOLUNTARILY SIGN THIS AGREEMENT AND RELEASE OF LIABILITY.

This release of all liability is entered into this ___ day of _____, _____, at _____, WA.

Print Name: _____

Signature: _____

IF VOLUNTEER IS A MINOR, PLEASE COMPLETE SIDE TWO.

Name of Minor: _____

Name of Parent or Legal Guardian: _____

Address: _____

Telephone: _____

**I HAVE READ AND VOLUNTARILY SIGN THIS AGREEMENT AND
RELEASE OF LIABILITY.**

Signature of Parent or Guardian