

**VOLUNTEER SERVICES AGREEMENT & ASSUMPTION OF RISK, RELEASE OF CLAIMS, AND
INDEMNIFICATION**
Kitsap County Parks

Thank you for your interest in volunteering with Kitsap County! As a Kitsap County Volunteer, you must agree to the terms of this Volunteer Service Agreement & Assumption of Risk, Release of Claims and Indemnification by signing and dating the form below. Youth under age 18 must have a parent or guardian sign and date the form.

BY SIGNING THIS APPLICATION AND VOLUNTEER SERVICES AGREEMENT:

I hereby certify that the information on this application is true and complete. I authorize Kitsap County Volunteer Services to verify any of the information on this application and to secure information deemed necessary from employers and personal references in order to determine my suitability for the volunteer position I am seeking with Kitsap County.

I also understand as a Kitsap County volunteer I will be performing services for civic, charitable or humanitarian reasons, or to complete requirements for certifications or to improve employment opportunities; I have not been promised and have no expectation of compensation for services rendered; and offer my services freely and without pressure or coercion, direct or implied, from the County.

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.

Volunteer Obligations. As a Kitsap County Volunteer, I agree to follow any volunteer manual, instructions and safety guidelines closely. Injury may be avoided by adhering to safety rules and safety procedures. I also agree to always conduct my Volunteer Service in a safe and professional manner.

Volunteer Insurance Coverage. Volunteer Service does not constitute County employment, and a Kitsap County Volunteer has no entitlement to any County benefits including, but not limited to, overtime, retirement benefits, workers' compensation, sick leave, or injury leave. I understand that Kitsap County undertakes no liability or financial obligation on my behalf because of the Volunteer Service. My health, homeowners, umbrella, and auto insurance (if any) shall provide primary coverage in the event of any injuries or losses to myself or others arising out of the Volunteer Service.

Assumption of Risk, Release of Claims, and Indemnification. I agree to assume and accept any and all risks, or in the alternative waive all rights to notice of risks, connected or associated with the Volunteer Service. I agree that Kitsap County shall not be held liable to its Volunteers in any way for injuries, death, damage to property, or other injuries, damages, or loss of any kind whatsoever, arising out of or in any way resulting from my actions, inactions, or negligence, or of others, or in the condition of the property, or of any equipment used. To the fullest extent permitted by law, I agree to protect, defend, indemnify, and save harmless Kitsap County, its officers, officials, employees, and agents, from any and all claims, demands, suits, penalties, losses, damages, judgments, or costs of any kind whatsoever, arising out of or in any way resulting from Volunteer Service, except for such acts or omissions as may constitute gross negligence by Kitsap County. This Assumption of Risk, Release of Claims, and Indemnification shall be affective as to Volunteer's successors in interest, heirs, and assigns.

I understand that my volunteer services may include a variety of physical hazards, including but not limited to, using tools, navigating extremely rugged, uneven, and/or steep terrain, and working outside in inclement weather conditions. I attest that I am physically fit, able, and qualified to participate in this volunteer activity. If necessary, I have communicated any accommodations needed to perform this work prior to signing this document. 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.

Volunteer (18 years and older)

Volunteer Signature (if over 18 years of age): _____

Printed Name: _____ Date: _____

Parent/Guardian (if volunteer under 18 years of age): As the parent or guardian of the minor providing Volunteer Service, and in consideration of my child's opportunity to serve as a Kitsap County volunteer I hereby agree to the foregoing terms and conditions.

Parent/Guardian Signature: _____

Printed Name: _____ Date: _____

I, _____ hereby declare under penalty of perjury under the laws of the State of Washington that I am over the age of 18, hereby acknowledge and represent unqualified authority to execute this Volunteer Service Agreement on their own behalf and/or on behalf of the Volunteer. I have fully read, fully understood, and freely agree to the foregoing terms and conditions.

DATED this _____ day of _____, 202__, in _____, Washington.
[month] [name of County where signed]

Signature