



Sun Valley General Improvement District Volunteer Agreement

I, _____, hereby offer and agree to volunteer my services without compensation of any kind from Sun Valley General Improvement District.

I understand and agree that I am not an employee of Sun Valley General Improvement District while acting within the scope of this Agreement.

I agree that I will not perform or engage in any volunteer activities for the District without prior approval from the District.

I understand and agree that I will be deemed to be as if I were a District employee for the purpose of Volunteer Protection Act of 1997, which will protect me from liability for injury or damage to others caused by some acts done by me within the course and scope of my duties as assigned by my supervisor.

I understand and agree that I am responsible for any such defense, damages or injuries which result from my actions, including any defense of, or damages or injuries to, Sun Valley General Improvement District or its employees.

I certify that _____ I am _____ I am not at least 18 years of age.

I am in good physical condition adequate to perform the duties for which I have volunteered, and I agree to tell my supervisor of any significant change in my health which would affect my ability to perform the duties for which I have volunteered.

I understand and agree that my position or duties may require me to undergo a background investigation, and that my failure to do so, or to pass the investigation, may preclude me from volunteering with Sun Valley General Improvement District.

I understand and agree that I am not to operate a vehicle, whether personal or owned by Sun Valley General Improvement District, in the performance of my volunteer duties unless specifically authorized, in writing, by my supervisor.

I agree to comply with the Districts Volunteer Program which I have been provided a copy of.

I understand and agree that volunteering with the District is not a right, and that my volunteer services can be terminated at any time, for any reason, with or without notice.

NAME:	Last	First	Middle	How often are you available to volunteer?	Areas of interest to volunteer
Street Address, City, State and Zip Code				Home Phone	Work Phone
E-mail Address				Cell Phone	Other
Special skills					

Volunteer Signature	Date	Parent/Guardian Signature (if volunteer is under 18)	Date
Emergency Contact		Relationship	Phone Number