



Volunteer Individual Application Form

City of Monroe Recreation Department, 120 E. First St. Monroe, MI 48161, 734-384-9156

Name: _____

Address: _____
Street City St. Zip

Home Phone: _____ Work Phone: _____

Cell Phone: _____ Email: _____

T-shirt Size (circle one): Yth Med Yth Lg Ad Sm Ad Med Ad L Ad XL Ad XXL

Emergency Contact

Name: _____ Relationship _____

Phone (home/cell/work): _____

Personal Information: This information is optional. It is used only to help us get a better idea of the demographic make-up of our volunteers.

Education: _____ Gender: Male _____ Female _____

School: _____ Employer Name: _____

How did you hear about us? (Circle one) Newsletter Friend Brochure Other _____

Volunteer Questionnaire

It is important to us that we match you in a volunteer opportunity that best suits your special skills and volunteer preferences. Please fill out the following section based on the type of service you would like to offer as a volunteer.

Preferred Park Facility/Location(s): _____

Program(s): _____

Please list any special skills, or interests that you have significant experience with that could help us place you as a volunteer. _____

Availability: Please indicate the days, times, and/or seasons you are available to volunteer.

VOLUNTEER RELEASE & WAIVER OF LIABILITY

I want to participate in the volunteer activities for the City of Monroe, henceforth referred to as City. As a City Volunteer, I freely, voluntarily, and without duress, execute this Release under the following terms:

1. Assumption of risk. I understand that my work for the City may include activities that are hazardous and/or physically strenuous, and I may be exposed to personal injury or damage to my property as a result of my activities, the activities of other persons, or the conditions under which my services are performed while participating in City volunteering. Though the City will provide me with support and possibly supplies to accomplish assigned tasks, I agree to the following:

- I will follow all instructions provided by the City, its employees, or volunteer coordinators.
- I will only use equipment that I know how to operate and use safely.
- I will not undertake any activity for which I do not feel sufficiently prepared or able and until I have received instructions.
- I will take all reasonable precautions to avoid injury to myself and to others and damage to property.
- Finally, I agree to assume the risk of injury or harm and release the City, Service Unit, its officers, directors, employees, and other City volunteers from all liability for injury, illness, death, or property damage arising from my work as a Volunteer.

2. Waiver and Release. I hereby release and forever discharge and agree to indemnify and hold harmless the City from any and all claims, liabilities, losses damages, costs and expenses resulting from injury or death of any person or person's property damage or that may arise out of my work as Volunteer. I understand that this release discharges the above entities from any liability that may result from my work whether caused by the negligence of the City.

3. Medical treatment. I release and discharge the City from any claim that arises or may arise due to any first aid, medical treatment, or services rendered to me.

4. Insurance. The City does not have responsibility for providing any health, medical or disability insurance coverage for me. **IT IS MY RESPONSIBILITY AS A VOLUNTEER TO ENSURE I HAVE MEDICAL/HEALTH INSURANCE.**

- I understand that if I drive my personal vehicle for City business while volunteering, I must have a valid driver's license and proof of auto insurance.

5. Photographic release. I grant to the City the right to use photographic images and video or audio recordings of me that are made by the City or others during my volunteer work for the City.

6. Duration of Release. My agreement to the terms in this Release & Waiver applies as long as I volunteer for the City.

7. Other. I agree that this Release is intended to be as broad and inclusive as permitted by the laws of Michigan and that this Release is governed by and will be interpreted according to the laws of Michigan. I understand that should any part of this Release be ruled invalid by a court, the other parts will remain valid and continue to be in effect.

I certify that I am at least eighteen (18) years of age or understand that, if I am not, I must have a VOLUNTEER RELEASE & WAIVER OF LIABILITY form signed by my parent or guardian to begin volunteering. I agree.

Signature: _____ Date _____