



**Growth and Resource Management Department
Environmental Management**

GREEN VOLUSIA VOLUNTEERS

Workplace Policies, Procedures, and Waiver

By physically or electronically signing this form, I understand and agree that:

- I have carefully read, understand, and agree to be bound by this document for a period of one year.
- My voluntary participation in County of Volusia's activities is entirely voluntary and does not entitle me to any compensation or fringe benefits.
- I have a responsibility to always conduct myself in an ethical, truthful, and honorable manner when interacting with the public, other volunteers, and County of Volusia employees.
- I must follow instructions, be courteous and cooperative with citizens, fellow volunteers, and employees. I must be reliable, arrive on time, provide notice when departing, record my volunteer time, and if unable to fulfill my volunteer duties provide reasonable notice, preferably a minimum of 8 hours.
- I must adhere to all safety guidelines and rules required by the County of Volusia.
- I must immediately notify my supervisor if I am injured or if any County equipment is damaged while performing my scheduled and documented volunteer activities.
- I will not assist with financial transactions of any kind.
- I am prohibited from using my position for personal gain or for the benefit of family members.
- I am prohibited from soliciting or accepting gifts from any person or firm doing or intending to do business with the County of Volusia.
- I understand I can be released from my volunteer services at any time, for any reason, or for no reason at all without notice.
- I understand and agree that during the volunteer activities, I may be photographed and/or videotaped by the County of Volusia for internal and/or promotional use. I hereby grant and convey to the County of Volusia all right, title, and interest, including but not limited to, any royalties, proceeds, or other benefits, in any and all such photographs or recordings, and consent to the County of Volusia's use of my name, image, likeness, and voice in perpetuity, in any medium or format, for any publicity without further compensation or permission.
- I hereby give consent and authority to the County of Volusia to obtain medical treatment on my behalf if I am injured or require medical attention during my participation in the volunteer activities.
- Regarding any third-party claim, I agree to indemnify, defend, and hold harmless the County of Volusia from any and all liability, losses, damages, judgments, or expenses, including attorneys' fees, that it may incur or sustain as a result of my wanton or willful misconduct or as a result of my actions occurring outside the scope of my participation in the volunteer activities.

All agreements and understandings between the undersigned and the County of Volusia are embodied herein, and this WAIVER covers all injuries and all the effects and results, and all expenses of every nature. The statements and agreements herein are not merely recital but are contractual in nature.

BY SIGNING, I ACKNOWLEDGE THAT I HAVE READ AND UNDERSTOOD ALL OF THE TERMS OF THIS WAIVER AND THAT I AM VOLUNTARILY GIVING UP SUBSTANTIAL LEGAL RIGHTS.

Date: _____ Phone Number: _____

Printed Name of Volunteer: _____ Signature: _____

Printed Name of Volunteer: _____ Signature: _____

Printed Name of Volunteer: _____ Signature: _____

Printed Name of Volunteer: _____ Signature: _____

E-mail: _____

Address: _____
