

Volunteer Service Agreement



Town of Hempstead Department of Conservation and Waterways

Name:		Date of Birth:								
<i>(Last)</i> _____ <i>(First)</i> _____ <i>(Middle Initial)</i> _____		/ /								
Address:										
<i>(Street)</i> _____		<i>(City)</i> _____	<i>(State)</i> _____ <i>(Zip)</i> _____							
Telephone:										
<i>(Home)</i> _____		<i>(Cell)</i> _____	<i>(Email)</i> _____							
Social Security Number:		Level of Education (circle the highest):								
		6 7 8 Middle School	9 10 11 12 High School							
		1 2 3 4 College	1 2 3 4 Grad							
Emergency Contact Info (if under 18 give parent or guardian): Name:		Relation:								
Address:										
<i>(Street)</i> _____		<i>(City)</i> _____	<i>(State)</i> _____ <i>(Zip)</i> _____							
Telephone:										
<i>(Home)</i> _____		<i>(Cell)</i> _____								
Location of Service:		Type of Service:								
Expected Duration of Service:		Do you have a Drivers License? <i>(If yes give DL Number)</i>								
Circle Days Available:		Physical Limitations:								
<table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 20px;">Mon</td> <td style="width: 20px;">Tue</td> <td style="width: 20px;">Wed</td> <td style="width: 20px;">Thu</td> <td style="width: 20px;">Fri</td> <td style="width: 20px;">Sat</td> <td style="width: 20px;">Sun</td> </tr> </table>		Mon	Tue	Wed	Thu	Fri	Sat	Sun		
Mon	Tue	Wed	Thu	Fri	Sat	Sun				
What Hours Available:										
<p>I certify that, to the best of my knowledge, the statements above are true and correct.</p> <p>I understand that my services are provided at no cost to the Town of Hempstead and I volunteer without compensation or benefits and must comply with the employment rules of the Town and follow the instructions of the Town representatives.</p> <p>The Town of Hempstead agrees, during my period of service, to provide Workman's Compensation coverage to the extent provided by the law. If I am injured during service, I agree that I must promptly notify the Department of Conservation and Waterways of any injury.</p>										
_____		_____								
<i>(Date)</i>		<i>(Signature of Volunteer)</i>								
_____		_____								
<i>(Date)</i>		<i>(Signature of Commissioner or Designee)</i>								
<p>Volunteers under 18 years old; parent or guardian MUST complete the following statement:</p> <p>I have read the Volunteer Service Agreement and confirm that _____ <i>(Volunteer's Name)</i></p> <p>has my permission to participate as a volunteer in the program for the Department of Conservation and Waterways of the Town of Hempstead.</p>										
_____		_____								
<i>(Date)</i>		<i>(Signature of Parent or Guardian)</i>								