



VOLUNTEER AGREEMENT & WAIVER

Forest Preserve Site Name: _____

VOLUNTEER ROLE – I am donating my time for this volunteer role and I understand that in this role, I am not an employee of the Forest Preserves of Cook County (the “Preserves”) and I will not receive compensation for this donated time. I also understand that volunteering does not necessarily lead to employment.

VOLUNTEER DUTIES – I will follow all the rules and regulations of the Preserves and will follow all directions and instructions given to me by Preserves staff and/or certified volunteer leaders.

LIMITATION OF EXTENT OF DUTIES – I am not authorized to enforce the rules and regulations of the Preserves but will notify Preserves staff when violations of rules and regulations are observed.

CONDUCT – I will conduct myself in a professional manner and present a positive image of the Preserves. This includes being respectful and helpful to other Preserves visitors, other volunteers and Preserves staff.

MEDIA CONTACT – In my role as a volunteer, I understand that I do not represent the Preserves in an official capacity and will not write or speak to the media on the behalf of the Preserves.

VOLUNTEER AT WILL – I understand that my participation in this volunteer program is subject to the above statements and to all codes of conduct of the Preserves. Failure to follow directions and instructions or violation of any of the rules, regulations, policies or codes of conduct can result in discipline or immediate dismissal from the program.

LIABILITY WAIVER - I understand that there are certain risks of injury in any position, particularly in outdoor programs or activities. I will make reasonable efforts to ensure my own safety and the safety of other Preserves visitors, other volunteers and Preserves staff. Any damage or injury to third parties due to my own acts is my responsibility and liability insurance for such damages or injuries is my own responsibility. This includes transportation and travel to and from the Preserves. The undersigned releases and discharges the Forest Preserves of Cook County and its Commissioners, officers, employees, and other volunteers from any claims which I may have against them arising in connection with this volunteer position.

PHOTO RELEASE – _____ Yes _____ No (check one)

I hereby grant and convey to the Preserves all rights, title and interest in any and all photographic images and video or audio recordings made by or on behalf of the Preserves during my volunteer work for the Preserves, including, but not limited to, any royalties, proceeds, or other benefits derived from such photographs or recordings. I further agree that the Preserves may photograph and/or videotape me while I am engaged in volunteer work at the Preserves and that the Preserves retain the rights to use these visual images and recordings in any manner without compensation to or prior authorization by me.

I have read and agree to the Volunteer Agreement and Waiver _____/_____/_____
Date

Signature

Printed Name

If under 18, adult signature is required to participate in volunteer activities at above site from:

_____/_____/_____ to ____/____/____ (Waiver can be valid for up to one year from signed date)
Date Date

Signature of parent or guardian

Printed name of parent or guardian

9.10.15 edition date