



COUNTY OF EL DORADO VOLUNTEER AGREEMENT AND RELEASE

I, _____, have voluntarily applied to provide volunteer services for the County of El Dorado (County). I, the volunteer (or the volunteer's parent/legal guardian, on the volunteer's behalf), agree to the following:

VOLUNTEER: I understand and acknowledge that I am engaging in this activity as a volunteer and not as an employee, official, officer, or representative of the County. I further acknowledge that I am not entitled to any compensation, benefit, or insurance coverage from the County, or any event promoter, sponsor, or organizer. I understand and acknowledge that the County can terminate my status as a volunteer for the County at any time for any reason.

CONFIDENTIALITY: In the course of my volunteer service, I may learn of, be told, or be asked to relay information of a private, confidential, or privileged nature. I will not, under any circumstance, during or after my volunteer service, disclose private, confidential or privileged information unless explicitly directed by the designated supervisor with express authority to give such direction. I agree not to take or post any photos of a sensitive and/or private matter for personal use or for sharing on social media without express permission from the designated supervisor.

PHOTOS/PUBLICITY:

I agree to allow my image or "likeness" to be used in published materials and websites that promote the County's Volunteer Programs. I grant the County all right, title, and interest in any and all photographic images, video, or audio recordings and other replications or documentation of my person or voice made by the County during my volunteer service with the County, including, but not limited to, any royalties, proceeds, or other benefits that are derived from such photographs or recordings.

I do not agree to allow my image or "likeness" to be used in published materials and websites that promote the County's Volunteer Programs.

COUNTY POLICIES, TRAINING, AND FORMS: For volunteer assignments lasting 30 calendar days or more, I have received the "Volunteer Resources and Required Training/Forms" document, and agree to read all applicable policies, complete all required training, and complete and submit all required forms as determined by the department head or designee and the Department of Human Resources.



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VOLUNTEER AGREEMENT AND RELEASE**

I have carefully read this agreement and fully understand its contents. I am fully aware that this is a partial release of liability as well as a contract between myself and the County of El Dorado, and sign it of my own free will.

Signature: _____ Date: _____
(Volunteer)

Signature: _____ Date: _____
(Parent/Legal Guardian)

Signature: _____ Date: _____
(Department Head or Designee)