

Volunteer Application

(Individual—YOUTH*)

General Information

Name: _____ Date: _____

Address: _____ City, Zip: _____

Home Phone: _____ Cell Phone: _____ Email: _____

In case of emergency, please contact:

Name: _____ Relationship: _____

Home Phone: _____ Business Phone: _____

ASSUMPTION OF RISK, RELEASE OF LIABILITY, AND INDEMNIFICATION OF CLAIMS

As the parent or guardian of the minor identified above ("My Child"), and in consideration of My Child's opportunity to serve as a King County volunteer ("the Service"), **I hereby agree to personally assume all risks for any harm, injury or damage that may occur to My Child in connection with the Service**, regardless of whether such risks, harm, injury, or damage were foreseen or unforeseen. **I accept full responsibility for the cost to treat any injury suffered by My Child in connection with the Service.**

I hereby exempt and release King County from all liability whatsoever for personal injury, property loss or damage, or wrongful death, caused by negligence in connection with the Service. On behalf of myself, my successors in interest, heirs, and assigns, **I agree that King County shall not be held liable to me in any way for any occurrence arising out of or related to the Service that may result in injury, death, or other injuries or damages to My Child. I agree to protect, defend, indemnify and save harmless King County**, its officers, officials, employees and agents, **from any and all claims, demands, suits, penalties, losses, damages, judgments or costs of any kind whatsoever, arising out of or in any way resulting from the Service**, except for such acts or omissions as may constitute gross negligence by King County.

I grant permission to photograph My Child during the Service and to use their image.

***Youth Under 18 Years of Age – PARENT OR LEGAL GUARDIAN MUST SIGN!**

Signature of Parent/Guardian: _____ Date: _____

Print Name of Parent/Legal Guardian: _____

Volunteer Opportunities

In order for King County’s Volunteer Program to best match your interests and skills with available projects, please check all opportunities that are of interest:

- Trash/Clean-up
- Recreation Programs
- School-Directed Community Service
- Environmental Restoration
- Trail Maintenance & Construction
- Youth Community Service
- Youth Achievement Project: _____
- Other (specify): _____

Project Description (If Applicable)

Staff Lead: _____

Name of Organization requiring Project: _____

Organization Contact (Group, Den, etc. leader): _____

Phone number: _____ E-mail address: _____

Project Description (may be brief if more detail is provided in organization’s required paperwork – if so, please attach that, or provide copy when it is completed):

Availability - Please specify times available to volunteer or approximate dates of project and project preparation

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Morning 9am -Noon							
Afternoon 12 - 5:00pm							
Evening 5 – 9:00pm							
One Time Project	Planning Dates					Tentative Completion Date	Actual Finish Date

For More Information -- Please contact our Volunteer Program Manager

Laurie Clinton - Volunteer Program Manager
 King County Division of Parks & Recreation
 6046 West Lake Sammamish Pkwy. NE, Redmond, WA 98052 (mailing address)
Phone: 206-296-4452 Fax: 206-205-3066 Email: laurie.clinton@kingcounty.gov