

MANATEE COUNTY GOVERNMENT
VOLUNTEER SERVICE AGREEMENT - OVER 18 YEARS OF AGE

I am an adult over eighteen years of age, of sound mind and body, and am fully aware of and understand the conditions of my voluntary work that will be performed for the Manatee County _____ department.

In consideration of the opportunity afforded to me to participate voluntarily in Manatee County(functions/duties) of _____, and in recognition of the possible injury or liability to which I may voluntarily subject myself, I and my heirs, executors, administrators and successors and assigns hereby knowingly, freely and voluntarily waive any right or cause of action, whatsoever, arising as a result of such activities from which any liability or injury may or could accrue to the Board of County Commissioners of Manatee County, Florida, or their agent or employees individually, except for actual medical expenses that might be incurred as a result of personal injury caused by the negligent or intentional acts of County employees as provided by Florida law.

I understand and agree that my voluntary participation in Manatee County activities does not entitle me to any compensation or other employment benefits. I further understand that I am NOT an agent or employee of Manatee County, Florida, and that I will not so represent myself to any person, government unit or corporate entity. I further understand and agree that I will be solely responsible for my actions while participating in volunteer activities.

I further understand and agree that my voluntary participation in the aforementioned activities is subject to termination at any time by Manatee County for any reason or no reason at all without notice, and that I am entitled to no recourse, nor will I seek any recourse in the event of such termination.

This WAIVER shall be determined to be and shall be a complete bar to any action which might otherwise be brought either by law or under any state or federal statute for the property injuries arising as result of voluntary participation in the activities contemplated herein except for those benefits afforded volunteers in accordance with Florida Workers' Compensation Law.

All agreements and understandings between the undersigned and Manatee County, Florida, 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 a contractual in nature.

Signed the _____ day of _____, 20_____.

(Signature of Volunteer)

(Signature of Witness)

(Signature of Authorized Manatee County
Representative, Department Director)

Print volunteer name:			
Address:	City:	State:	Zip:
Phone number:			

Instructions (Volunteer Service Agreement - Over 18 Years of Age):

1. Complete volunteer activity information section below.
2. Review volunteer activities with volunteer.
3. Instruct volunteer to read and sign *Volunteer Service Agreement* form.
4. Upon obtaining all signatures, provide copy to volunteer and retain original in department files.
5. Optional: Document performance of volunteer when volunteer's activities are completed (you may use section of form below).

NOTE: **Volunteer activities of a sensitive nature may require background and other checks.**

VOLUNTARY ACTIVITY INFORMATION SHEET

Department: _____

Supervisor name: _____ Title: _____

Expected begin date of volunteer activity: _____

Expected end date of volunteer activity: _____

Volunteer work hours from: _____ a.m./p.m. to: _____ a.m./p.m.

Describe volunteer work activity: _____

(OPTIONAL) OVERALL PERFORMANCE OF VOLUNTEER (circle one)

POOR AVERAGE GOOD

COMMENTS: _____
