
Volunteer Agreement

Thank you for agreeing to join the thousands of people who volunteer their time and talent to the Dane County each year. Your service is vital to our success. Please read the following information carefully and sign where indicated.

I, _____, (referred to as “the Volunteer” throughout the rest

Please print your name here

of this document) and Dane County agree to the following terms in their effort to supplement the work performed by Dane County employees:

1) The Volunteer may expect the following from Dane County:

- Dane County will respect the Volunteer and show appreciation for the Volunteer’s activities;
- Dane County will provide Volunteer with a clearly defined description of the Volunteer’s duties; and
- Dane County will facilitate a cooperative working relationship between and among Dane County staff and other volunteers, and will provide appropriate supervision and direction, as needed.

2) Dane County may expect the following from the Volunteer:

- The Volunteer will perform their volunteer duties in a professional manner under the direction and control of Dane County staff or their designee;
- The Volunteer will work according to a mutually agreeable schedule, but if something comes up that prevents the Volunteer from working, the Volunteer will notify his/her supervisor as soon as possible;
- The Volunteer will contribute to a cooperative working relationship between and among Dane County staff and other volunteers; and
- The Volunteer will comply with established County policies and procedures, including safety rules.

3) Insurance.

- The Volunteer understands that he/she is not a Dane County employee and is not entitled to compensation in any form, including but not limited to wages. As a non-employee, the Volunteer further understands that he/she does not qualify for worker’s compensation benefits if injured while performing volunteer work, and therefore, the Volunteer should have personal medical insurance.
- If the Volunteer drives a motor vehicle as part of his/her Volunteer duties, the Volunteer understands that he/she must have a valid Wisconsin driver’s license and that Dane County is not responsible for any damage to the vehicle which may occur during his/her volunteer services, and therefore, the Volunteer should have personal car insurance under these circumstances.
- The Volunteer understands that Dane County carries general liability insurance and the Volunteer may be eligible for legal defense and indemnification by Dane County if someone brings a claim against the Volunteer based upon the services performed by the Volunteer in good faith for Dane County.

- The Volunteer understands and accepts any and all risks attendant to volunteering for Dane County, and agrees to indemnify, release, and hold harmless Dane County, its Board and officers, agents and employees from and against all claims, demands, loss or liability of any kind or nature for any possible injury (including but not limited to personal injury and/or death) incurred while providing services under this Agreement.
- 4) The Volunteer grants permission for his/her photo to be taken and used in any promotional material produced by the Dane County.
- 5) Either party may terminate this Agreement at any time for any reason with notice to the other party. The parties agree that this is their entire agreement, and no agreement, oral or written, exists outside of this document.

Please sign in the presence of a Dane County employee:

Volunteer

For Dane County:

Print name & title: _____

Signature

By: _____
Signature

Date: _____

Date: _____

**PARENTAL CONSENT
FOR VOLUNTEERS WHO ARE UNDER AGE 18**

This is to certify that I am the parent or guardian with legal responsibility for this child-volunteer, and that I agree with and consent to this child-volunteer's compliance with this Agreement, including, but not limited to, this child-volunteer's release as provided above, and for myself, my heirs, assigned, and next of kin, release and agree to indemnify and hold harmless Dane County, its Board and officers, agents and employees from and against all claims, demands, loss or liability of any kind or nature for any possible injury (including but not limited to personal injury and/or death) incurred while this child-volunteer is providing services under this Agreement.

Volunteer's Parent/Guardian:

Please printed name & relationship to the child-volunteer: _____

Signature: _____ Date: _____

**THANK YOU FOR VOLUNTEERING WITH DANE COUNTY
Please return to the address on the front of this form.**

