

Volunteer Service Contract

The First Selectman must approve the application of any applicant requesting volunteer service for the Town of Lebanon before the start of any work.

Applicant Information

Name: _____
Address: _____
Telephone: _____
Emergency Contact: _____
Medical Contact Information: _____
Date of Birth: _____
Parents Name & Address: _____
(if applicant under the age of 18) _____
Parents Telephone: _____

Volunteer Service Information

Type of Volunteer Service: _____
List Any Work Limitations: _____

Location of Volunteer Service: _____

Potential Schedule for Volunteer Service:

| | |
|-----------|-------|
| Monday | _____ |
| Tuesday | _____ |
| Wednesday | _____ |
| Thursday | _____ |
| Friday | _____ |
| Saturday | _____ |
| Sunday | _____ |

Hold Harmless Agreement

I, _____ make application to the Town of Lebanon to conduct volunteer service work. I understand that I am under the direct control of my volunteer service supervisor and employees of the Town of Lebanon and will abide by instructions and directives given to me. I further understand that I will not go into any unauthorized areas or offices without first asking permission and, if needed, being escorted. I also understand that I am not to use any equipment I have not been authorized to work with.

I further understand that I will report as agreed upon and complete the work required, or, proper authority will be notified. It is agreed to by me that repeated failure to show for work, lateness to work or not completing my assignments may result in the termination of my community service work and a report being filed with the proper authority. I further state that I have advised the proper supervisor of the Town of Lebanon of any known medical condition that may prohibit me from performing certain types of work.

I further release, hold harmless, for myself and for my heirs, assigns, successors, executors, administrators, and legal representatives, agree that I will not sue the Town of Lebanon, or its agents, servants, or employees, from or regarding any injury or loss to person or property, including wrongful death or emotional injury, that I may sustain while performing volunteer work for the Town of Lebanon, even if such injury or loss was caused by the negligence of the Town of Lebanon or its agents, servants or employees.

I do understand that if I am injured while performing assigned work I will report it immediately, but as I am not an employee of the Town of Lebanon I have no right to claim a worker's compensation injury. Further, that I will be responsible for any medical bills should I become injured. I also know that if I am given a task and I am not familiar with a piece of equipment that I will ask for training in its use, or, that I can decline to use the piece of equipment, such as a power tool. By my use of the tool I state that I know how to use it safely and properly.

Agreement of Applicant

(Printed Name)

Approval of First Selectman

Joyce R. Okonuk, First Selectman