



City of San Diego
Citywide Volunteer Program
Martin Luther King Day Celebration



Special Event Assistance Needed for Martin Luther King Day Celebration

When:

8:00a.m. - 5:00p.m. on Saturday, January 11, 2014

Where:

Martin Luther King Recreation Center
6401 Skyline Drive
San Diego, CA 92114

Activities:

Volunteers will assist Recreation Program Center Directors with event set up, crafts, face painting, relay races, booths, and event clean up. Two volunteer shifts are available, in the morning, from 8:00 a.m. – 1:30 a.m. or in the afternoon, from 1:00 p.m. – 5:30 p.m.

Volunteer Age Requirement:

The minimum age to volunteer is 8 with an adult and 14 without an adult. Youth ages 14 and over must have parent/legal guardian signed waiver prior to volunteering. The waiver can be found on the next page. Please print and fill out the waiver, and bring it with you to the event (the waiver can also be signed on the day of event). All volunteers over age 18 will also be asked to sign a waiver.

Contact:

Kathy Castello at 619-525-8284 or at KCastello@saniego.gov



City of San Diego
Citywide Volunteer Program
 Individual Participation Agreement



Name (Last, First MI) _____

Address _____

City _____ State _____ Zip _____

Home Phone (____) _____ Cell Phone (____) _____

Are you 18 or older? (Circle One:) Yes No If No, state DOB ____/____/____

Email address: _____

I (or my child) _____, agree to volunteer my (or his/her) services to the City of San Diego in the capacity of Special Event Assistance, in the Parks and Recreation department. I (or my child) understand my (or his/her) volunteer schedule to be the following days: January 11, 2014 during the following hours: 8:00-1:30 or 1:00-5:30 for 1 day _____ months or until the project is completed. I (or my child) am volunteering my (his/her) services for the City of San Diego on a voluntary basis without anticipation of payment of any kind.

I (or my child) certify that I (or he/she) have read and understand the Volunteer Opportunity Description and the Risk Assessment for this volunteer opportunity, and the rules and regulations applicable to the volunteer opportunity and the City’s Volunteer Program. I (or my child) agree to abide by those rules and regulations. I (or my child) further certify that I (or my child) am capable of performing the tasks set forth in the opportunity description and know of no physical condition which would preclude the performance of those tasks.

I understand that I (or my child) must follow policies and procedures, per City staff supervising my volunteer efforts, which ensure compliance with such legislation.

I agree (or agree to inform my child) not to use any equipment or tools with which I (or my child) am unfamiliar or do not know how to operate safely. I agree (or agree to inform my child) to perform only those tasks assigned, observe all safety rules, and use care in the performance of assignments. If I (or my child) cannot complete the project or otherwise meet my commitment, I (or my child) will notify the supervisor immediately.

I understand that I (or my child) may be photographed, videotaped, or recorded and that the resultant photographs, videos, or recordings may be used for promotional materials. I understand that my child (or I) will not receive compensation for the use of these and that my child (or I) might not be given notice of when these materials are used. I (or my child) acknowledge that the City Council has adopted legislation governing liability and Workers’ Compensation claims that may arise from my (or my child’s) volunteer service.

I acknowledge that I (or my child) may be dismissed at anytime.



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Emergency Contact Information

Person(s) to contact if I become ill or injured while on volunteer assignment:

Name _____ Home Phone (____) _____
Work/Cell Phone (____) _____ Relationship to Volunteer _____

Any other information you would like in our files in case of emergency, including known allergies or physical limitations:

Volunteer's signature _____ Date ____ / ____ / ____

For City Use Only:

Location of Opportunity Martin Luther King Recreation Center

On Site Supervisor Signature _____

- Received Volunteer Opportunity Description and Risk Assessment
- Received applicable rules and regulations
- If volunteer will be driving personal vehicle, attach photocopy of Driver's License, auto registration and insurance card.



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If the volunteer is a minor (17 years of age and under) a parental/legal guardian must also complete the following information.

I, _____, consent to allow my minor child or dependant _____ to participate in the City of San Diego's Volunteer Program on the terms and conditions set forth above. I have signed this agreement on behalf of _____ and certify that I am his/her parent or legal guardian.

Legal Guardian's signature _____ Date ____/____/____

If the volunteer is a City of San Diego employee, they must also complete the following information.

I, _____, agree to perform volunteer services for the City of San Diego's under the terms and conditions set forth above. I acknowledge and agree that the services I will provide pursuant to this agreement are outside the scope of my duties as an employee of the City of San Diego, and are not within my job classification and are separate and apart from any paid work responsibility with the City of San Diego.

Volunteer's signature _____ Date ____/____/____