

**Chico Park Division Volunteer Program
Agreement for Individual Voluntary Service**

Please print or type

Name: _____ Phone: _____

Address: _____
Street City State Zip Code

I understand that I will not receive any compensation for my work with the City of Chico and that volunteers are **not** considered to be employees for any purpose. I further understand that the City of Chico **will not** provide me with Worker's Compensation Insurance coverage or benefits (this means if injured while performing volunteer work for the City of Chico, I must obtain coverage through personal medical insurance).

I understand that either the City of Chico or I may cancel this agreement at anytime by notifying the other party.

I hereby volunteer my services to assist the Chico Park Division in its authorized work.

Signature of Volunteer Date

Signature of Parent/Guardian if Minor Date

The Chico Park Division agrees, while this contract is in effect, to provide such materials, equipment and facilities as are necessary and needed to perform the work described.

Signature of Volunteer Coordinator Date

Agreement terminated on: _____