PORTLAND PARKS
& RECREATION
www.PortlandParks.org

Portland Parks & Recreation
Application for Volunteer Service

HOP and Friends of Laurelhurst Park

☐ **Check here if Returning Volunteer** (if your information is the same just print your name, tel. # & sign at the bottom)

Name: _____ **Date**: _____
First Last

Address: _____
Number/Street City State Zip Code

Phone: Day _____ Eve _____ **Email:** _____

In Emergency, Notify: _____
Name Phone Relationship

Insurance Information for Volunteers

Thank you for volunteering your time and energy with Portland Parks & Recreation. We are happy to have you with us and hope the time you spend will be rewarding to you.

We have an excellent safety record for our volunteer program. We don't anticipate that you'll be involved in an accident, but it is important you understand the extent to which our volunteer program is covered by the City of Portland insurance. We want you to be aware of any potential risks involved with the tasks you have selected and use good judgement in performing those tasks.

As a volunteer, you are NOT covered by the City of Portland's Workers Compensation program. You are urged to have your own health insurance in the event you are injured while performing your volunteer duties.

You ARE covered by the City's General Liability Fund. This will protect you in the event of property damage or accidental injury to the public as a result of your volunteer duties assigned by Portland Parks & Recreation.

If you drive a motor vehicle as part of your volunteer duties, you must have a valid Oregon Driver's License. If you drive a City vehicle, you'll be covered for property damage or bodily injury to others resulting from a vehicle accident. You should have your own health insurance to cover yourself. If you wish to drive your own vehicle to perform your volunteer duties, the above coverage applies; however, the City will not be responsible for any damage to your vehicle, so you must carry your own auto insurance for this purpose.

I have read this information on volunteers and insurance.
☐ (Check if a group leader) I agree to convey this information to all members of my group.

_____
SIGNATURE (Guardian if volunteer is under 18)

Portland Parks & Recreation programs and services reflect the cultural diversity of our community.
We do not discriminate on the basis of religion, race, color, national origin or disability.