



# Volunteer Service Agreement

**Please note:** Volunteers must also complete the New York State Service Agreement Form on our website.

**PLEASE PRINT:**

Name:	Location/Facility:
Street:	Date(s) of Service:
City/State/Zip:	To:
Telephone:	From:
Email:	Are you 18 years of age or older?
	<input type="checkbox"/> Yes <input type="checkbox"/> No If no, state age: _____
	(Parent or guardian must sign below if under 18)

<b>DESCRIPTION OF VOLUNTEER SERVICE:</b>

<b>IN CASE OF EMERGENCY NOTIFY:</b>	
Name:	Address:
Telephone:	City/State/Zip:

I certify, to the best of my knowledge, that the statements I have made are true and correct. I understand that the volunteer services described above are performed at no cost to the state. I will be required to comply with all regulations of the Office of Parks, Recreation & Historic Preservation ("OPRHP") and the regulations and procedures of the \_\_\_\_\_ Region.

The \_\_\_\_\_ Region of the Office of Parks, Recreation & Historic Preservation agrees, during the period of service, to provide the volunteer Worker's Compensation coverage to the extent provided by law. If I am injured, I agree to promptly notify OPRHP and OPRHP shall process my claim pursuant to the Public Officers Law §17. I agree to immediately notify OPRHP's Counsel's Office at (518) 486-2921 should I require such defense and indemnification. The personal information on this form will be treated as private pursuant to the Personal Privacy Protection Act.

\_\_\_\_\_  
(Date) Signature of Volunteer

\_\_\_\_\_  
(Date) Signature of Park Manager or Designee

**If you are not 18 years of age or older, a parent or guardian must complete the following statement:**

I have read the Volunteer Services Agreement and confirm that \_\_\_\_\_  
has my permission to participate as a volunteer in the program described for the \_\_\_\_\_ Region.

\_\_\_\_\_  
(Date) Signature of Parent or Guardian

This form is valid for the calendar year in which it is signed if it is being used for multiple volunteer days.