

## VOLUNTEER GROUP SERVICES AGREEMENT

Volunteer groups play an increasingly important role in enhancing, maintaining and restoring our CaliforniaState Parks. We thank you for being part of this effort.

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SPONSORING GROUP OR ORGANIZATION (Include name, address, zip code, and telephone number.)				
SPONSORING GROUP OR ORGANIZATION LIAISON (Include name, address, zip code, and telephone number.)				
PERSON FROM SPONSORING GROUP OR ORGANIZATION TO BE NOTIFIED IN AN EMERGENCY (Include name, address, zip code, and telephone number.)				
PROJECT DESCRIPTION, INCLUDING THE NAME(S) OF THE PARK(S), AND (IF APPLICABLE) LOCATION(S) WITHIN THE PARK(S) WHERE THE PROJECT WILL TAKE PLACE (If more space is needed, attach additional page.)				
	DURATION	I OF PROJE		
☐ Short-Term (Less than 6 mo *Long-Term Projects require	nths) <b>T</b> *Long-Term (6 months) a reassessment of this agreement			
AGREEMENT BY THE GROUP OR ORGANIZATION				
We agree to volunteer our services to accomplish the work described above to assist the California Department of Parks and Recreation, hereafter known as the Department, with the following conditions:				
<ul> <li>Roster: We agree to provide the Department with an attendance roster including name, address, and phone number of participants.</li> <li>We agree to provide the Department with updated attendance roster(s) if the volunteers with our organization change over the course of the project.</li> </ul>				
<ul> <li>Juveniles: Our group represents that if juveniles (under age 18) are participating, we assume all responsibility for obtaining formal parental/guardian consent for their attendance and participation.</li> </ul>				
<ul> <li>Waiver of Liability and Hold Harmless Agreement: We understand and acknowledge that the Department does not provide insurance coverage for recognized volunteer groups or for the volunteer activities encompassed by this agreement. We accept the responsibility for providing accident insurance and/or workers' compensation coverage for the individuals participating in this volunteer activity, and if requested, agree to provide evidence of insurance coverage. We agree to indemnify and hold harmless the Department and its employees, officers, sponsors, and agents, from any claim for injury or damages to any person arising out of or in any way connected to this volunteer activity.</li> </ul>				
• Termination: Either we, or the Department, may terminate this agreement, at any time, by notifying the other party in writing.				
GROUP/ORGANIZATION REPRESENTATIVE'S SIGNATURE AND PRINTED NAME TITLE DATE				
AGREEMENT BY THE DEPARTMENT OF PARKS AND RECREATION				
	and agrees, while this agreement is in ef s are needed and are available to accon			
DEPARTMENT REPRESENTATIVE'S SIGNAT	ſURE			DATE
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*LONG-TERM PROJECT REASSESSMENTS:	Date 1 / *Initials:	1	Date 2 / *Initials:	1
	Date 3 / *Initials:		Date 4 / *Initials:	
	Date 5 / *Initials:	! 	Date 6 / *Initials:	
		<u> </u>		·
THIS AGREEMENT WAS COMPLETED TERMINATED ON (Date)				
DEPARTMENT REPRESENTATIVE'S SIGNATURE DATE				