



VOLUNTEER PROFILE



Today's Date: _____

Name: _____

Address: _____ Apt. # _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Work Phone: _____

Other Phone: _____ E-mail: _____

I am: employed unemployed student retired

AVAILABILITY

Please check times when you are most available.

- Morning Afternoon Evening
- Monday Tuesday Wednesday
- Thursday Friday Saturday
- Sunday

PERSONAL INFORMATION

Hobbies and Interests:

Past volunteer organizations/positions:

I want to volunteer because:

PREFERENCES & SKILLS

Please check any skills/preferences that apply:

- I would like to work with seniors.
- I would like to work with youth.
- I enjoy working outdoors.
- I work best in a quiet environment.
- I work best in a busy environment.
- I like to organize, label, and file things.
- I prefer working as an individual.
- I prefer working with large groups of people.
- I am bilingual. (Language: _____)
- I feel comfortable speaking in public.
- I enjoy writing.
- I have a special talent (such as painting, playing an instrument, martial arts). It is: _____
- I have my own vehicle, and may be willing to assist with errands or transportation.
- I have computer skills in the following programs: _____
- I have other skills that were not listed: _____

Please turn this page over and complete the back side. Thanks!

EMERGENCY INFORMATION

Emergency Contact: _____ Relationship: _____
Phone : Day (____) _____ - _____ Evening (____) _____ - _____

VOLUNTEER AGREEMENT

I, _____, agree to serve as a volunteer for the City of Wilsonville. In so volunteering, I understand that such activity may involve risks of injury, loss, or damage to myself and others. By signing this agreement, I expressly agree to assume any and all such risks. I understand the nature of acts I am to perform as a volunteer and certify that I have taken all necessary precautions to be certain that I am in proper condition to participate in such activities. In addition, in consideration for being permitted to perform volunteer activities, I understand, accept and agree to the following:

1. I hereby release, indemnify and hold harmless the City of Wilsonville, its officers, employees, and agents from any and all claims, action, demands, loss, cost or expense including attorney fees, for damages or personal injury to myself or damage to any property owned by me or others as a result of my performing volunteer activities under the auspices of the city of Wilsonville.
2. I understand that I am covered by the City’s General Liability Insurance, which, subject to the terms thereof, cover liability arising from my acts as volunteer that are within the course and scope of my assigned duties. I understand and accept that I am NOT covered by the City’s Workers Compensation Program and will look to my own health insurance. If I drive a motor vehicle as part of my volunteer duties, I hereby warrant that I have a valid Oregon Driver’s license and auto insurance, and am limited to that insurance for coverage for driving related activities.
3. I understand that as a volunteer, I may come into contact with or possession of personal information about persons served by City departments. I understand that such personal information is treated as confidential and agree not to share such information with others, except as I may be directed by a supervisory employee of the City. If I am in doubt as to whether personal information is confidential in a particular case, I agree to keep the information confidential until such time as a supervisory employee determines that it is not.
4. I grant full permission to the City for use of any photographs, videotapes, recording or any other record of my volunteer acts for any purpose.

Printed Name of Volunteer _____ Signature _____ Date _____

Printed Name of Parent/Guardian (if volunteer is under 18) _____ Signature _____ Date _____

For Volunteer Services Use Only

Meeting: _____ Letter: _____ Assignment: _____ Vol. Wks.: _____