



# CITY OF PICO RIVERA VOLUNTEER PROGRAM APPLICATION

Name: \_\_\_\_\_

*Fill out if a minor (under age of 18)*

School: \_\_\_\_\_ Grade: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Daytime Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Have you ever been convicted of a violation or attempted violation of section 243.4 of the Penal Code, a sex offense against a minor, or of any felony, which requires registration Pursuant of Section 290 of the Penal Code?  Yes  No

Assignments Preferred: \_\_\_\_\_

Previous Volunteer Experience: \_\_\_\_\_

Other Applicable Experience: \_\_\_\_\_

Days/Hours Available:

Sunday: \_\_\_\_\_ Monday: \_\_\_\_\_ Tuesday: \_\_\_\_\_

Wednesday: \_\_\_\_\_ Thursday: \_\_\_\_\_ Friday: \_\_\_\_\_

Saturday: \_\_\_\_\_

Do you have any limitations related to health or physical ability? If so, please explain:

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# VOLUNTEER PROGRAM WAIVER AND RELEASE

I hereby acknowledge that as a volunteer for the City of Pico Rivera in capacity of volunteer, I am not an employee of the City of Pico Rivera. I intend to perform voluntary services for the City of Pico Rivera without compensation.

As a condition of performing the above referenced volunteer duties, I hereby knowingly and unequivocally waive, release and discharge any and all rights that I, my heirs, assigns, agents, or other representatives may have or which hereafter may accrue to me, to file any claim, lawsuit and/or any other cause of action against the City of Pico Rivera, its employees, officers, agencies, other volunteers and officials as a result of performing said volunteer services. In granting this full and complete release and wavier of liability on the part of the City of Pico Rivera, I specifically waive California Civil Code Section 1542, which states:

A general release does not extend to claims, which the creditor does not know or suspect to exist in his favor at the time of executing the release, which if known by him, must have materially affected his settlement with the debtor.

I expressly desire to release the City of Pico Rivera, its employees, officers, agencies other volunteers and officials from any financial responsibility to me for any personal injury and/or property damage I may incur as a result of my voluntary services, even when it results from the negligence, both active and passive, of the City of Pico Rivera and/or its employees.

I understand that accidents and injuries can arise out of my volunteer activities; knowing the risk, nevertheless, I hereby agree to assume those risks and to release and to hold harmless the City of Pico Rivera, its employees, officers, agencies, other volunteers and officials, who (through negligence or carelessness) might otherwise be liable to me (or my heirs, assigns, agents or other representatives) for damages.

No promise, inducement, or agreement has been made to me to induce me to release the City of Pico Rivera from liability for any personal injury and/or property damage incurred by me as a result of my voluntary services, nor has any promise, inducement, or agreement been made to me in return for the express waiver of rights referred to above.

I give my permission to the City of Pico Rivera to photograph/video tape me or my children participating in the programs for use in the City of Pico Rivera publicity and publications and will not seek compensation for such. Videos/Photos will be used for the purpose of promoting various programs and services to the community

### Declaration of Witness

The above individual, in my presence, acknowledged that he/she had read and fully understood the meaning and consequences of the Waiver and Release of All Claims, and he/she signed it in my presence.

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

Parent or Guardian Signature (if minor): \_\_\_\_\_

Witness: \_\_\_\_\_