

Volunteer Application

Personal Information:

Last Name: _____ First Name: _____
Home Address: _____ City: _____ Zip Code: _____
Home Phone: _____ Mobile Phone: _____
Date of Birth: _____ Volunteer Email: _____
Special Health Information/Important Medication: _____

Emergency Contact(s):

Name: _____ Relationship: _____ Phone: _____
Name: _____ Relationship: _____ Phone: _____

Availability:

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

Check off areas of interest:

- | | |
|--|---|
| <input type="checkbox"/> General | <input type="checkbox"/> Senior Club |
| <input type="checkbox"/> Senior Grocery Program | <input type="checkbox"/> Special Events |
| <input type="checkbox"/> Dine-In & Dough House *Food handler certification | <input type="checkbox"/> Other: |

*If volunteering in an area with participants under 18 years of age, a background check through Los Alamitos Police Dept. is required

Experience:

Please list any group or organization that you have been a member of along with your role or duties:

Please list any volunteer experience or special skills:

Los Alamitos Recreation and Community Services Department

10911 Oak Street, Los Alamitos, CA 90720

Phone (562) 430 - 1073 | FAX (562) 594-9657

www.cityoflosalamitos.org/recreation

Volunteer

Waiver, Release of Liability, Indemnity and Assumption of Risk

Voluntary Participation

I specifically acknowledge that I am engaging in this Activity as a volunteer and not as a City of Los Alamitos employee, agent, official, officer or representative. I agree to only perform those tasks assigned, observe all safety rules, and use care in the performance of my assignments.

I understand that the City of Los Alamitos provides no compensation for my services and that I am not entitled to any benefits from the City, including, but not limited to, workers' compensation benefits.

Assumption of Risk

I fully understand that my/my child's participation in the events/programs/classes listed below, exposes me/my child to the risk of personal injury, death or property damage. I hereby acknowledge that I/my child am/is voluntarily participating in this event/program/class and agree to assume any such risks. I hereby release, discharge and agree not to sue the City of Los Alamitos or LAUSD or Military Department of the State of California and each of their respective officers, agents, employees, representatives, board members, volunteers and sponsors for any injury, death or damage to or loss of personal property arising out of, or in connection with my/my child's participation in the event/program/class from whatever cause, including the active or passive negligence of City of Los Alamitos or LAUSD or Military Department of the State of California and each of their respective officers, agents, employees, representatives, board members, volunteers and sponsors, or any other participants in the event/program/class. The parties to this agreement understand that this document is not intended to release any party from any act or omission of "gross negligence," as that term is used in applicable case law and/or statutory provision. In consideration for being permitted to participate in the event/program/class, I hereby agree, for myself, my heirs, administrators, executors, assigns, and agents that I shall indemnify and hold harmless City of Los Alamitos or LAUSD or Military Department of the State of California and each of their respective officers, agents, employees, representatives, board members, volunteers and sponsors, from any and all claims, demands, actions or suits arising out of or in connection with my participation in the event/program/class. I also grant my irrevocable right and permission with respect to photographs, videos, motion pictures, and/or sound recordings being taken of myself/my child. I further certify that said person/minor is in good health and has no physical or other impediment which would endanger him/her from participating in such an activity. I hereby consent to any x-ray, examination, anesthetic, medical or surgical diagnosis or treatment and hospital care to be rendered to myself/my child by a physician or hospital selected by staff for any injury or incident arising out of or connect with this event/program/class. The City of Los Alamitos has put into place preventative measures and protocols to protect program participants from the spread of COVID-19; however, the City of Los Alamitos cannot guarantee that you or your child will not become infected with COVID-19. Further, attending the recreation program could increase your risk and your child's risk of contracting COVID-19. By signing this Liability Release and Assumption of Risk, I acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that my child and I may be exposed to or infected by COVID-19 by attending the recreation program and that such exposure or infection may result in personal injury, illness, permanent disability, and death. I understand that the risk of becoming exposed to or infected by COVID-19 at the recreation program may result from the actions, omissions, or negligence of myself and others, including, but not limited to, the City of Los Alamitos, its officers, agents, and employees, and other program participants and their families. I voluntarily agree to assume all the foregoing risks and accept sole responsibility for any harm, injury, or damage that may befall my child or myself relating to me or my child's attendance to the recreation program. On my behalf, and on behalf of my child, I hereby release, covenant not to sue, discharge, and hold harmless the City of Los Alamitos, its officers, agents, and employees (collectively "Released Parties") from any and all claims, including all liabilities, actions, damages, costs or expenses of any kind arising out of or relating to my child's attendance to the recreation program ("Claims"). I understand and agree that this Liability Release and Assumption of Risk includes any Claims based on the actions, omissions, or negligence, whether passive or active, of the Released Parties and irrespective of whether a COVID-19 infection occurs before, during, or after me or my child's attendance at the recreation program. I HAVE CAREFULLY READ THIS WAIVER, RELEASE, HOLD HARMLESS AND AGREEMENT NOT TO SUE AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT THIS IS A FULL RELEASE OF ALL LIABILITY AND SIGN IT ON MY OWN FREE WILL.

Printed Name of Volunteer

Signature of Volunteer

Date

My City  My Los Al