



**CITY OF FLAGSTAFF
VOLUNTEER FORM**

Volunteer Name: _____

Address: _____

City: _____ State _____ Zip Code: _____

E-mail: _____ Cell Phone: _____

Emergency Contact: _____ Phone: _____

Group/Agency Volunteering on behalf of? _____

Where and how long will you volunteer? _____

This Section Must be Completed for Volunteer:

Agreement Regarding Service

I/my child _____, choose to provide services for the City of Flagstaff as a volunteer and understand that my/my child's services are donated to the City of Flagstaff without contemplation of compensation or future employment, and given for humanitarian, religious or charitable reasons. I/my child will report any injury or incident to the City supervisor immediately. I/my child agree to abide by any rules and directions provided by the City related to the services.

Signature of Volunteer (Parent or Legal Guardian must sign for a minor): _____

This Section is Optional but Requested by City:

Consent Regarding Recording/Use of Image

I give my consent to the City to make a voice/video recording of me/my child _____. The City may publish my/my child's photo, image, voice/video recording ("Likeness") on the City website, Cityscape magazine, City brochures or flyers, and/or other medium for the purpose of reporting on current or promoting future City services, programs or events.

Signature of Volunteer (Parent or Legal Guardian must sign for a minor): _____

This Section Must Be Completed for Minors Only:

Consent Regarding Urgent Medical/Dental Care for Minor

In the event of an emergency or medical condition that appears urgent to the City, I authorize the City to obtain medical care for my child _____, and authorize all medical providers, including but not limited to paramedics, urgent care centers, dentists, hospitals or clinics to diagnose, treat and care for my child and I agree to pay for medical care rendered for non- industrial injuries. Child's insurance and policy no.: _____

Signature of Parent or Legal Guardian: _____

This form should be kept in a secure location within the department, according to the current Record Retention Schedule (5 years after termination of volunteer service).