

## City of Cannon Beach

## Volunteer Services Agreement for the City of Cannon Beach Farmers Market

Name:				
Home Phone:		Cell Phone:		_
Email:				
Street address:			City:	
State:	Zip:	_		
If Volunteer is under	<b>Age 18.</b> Name of P	arent or Guardian: ַ		
Home Phone:		Cell Phone:		_
Email:				
Street address:			City:	
State:	Zip:	_		
			volunteer. I understand ce will not confer on the v	
I give permission for _ by the Cannon Beach		to pa	orticipate in the volunteer	activity sponsored
From to (date)	(date)	(Parent/Gu	uardian Signature)	(date)
Emergency Contact N	lame:			
Relationship to Volun	teer:			
Home phone:		Cell phone:		

<u>Brief description of work to be performed:</u> Cannon Beach Farmers Market Volunteers perform a variety of services based on the shift they work. These services include set up for the Market, traffic control, greeting and counting visitors, working in the Information booth, assisting vendors and visitors and breaking down the Market grounds. Cannon Beach volunteers are covered under the City workers compensation policy. If you have an injury of any kind be sure to notify the Farmers Market manager and fill out a workers compensation form.

I understand that I will not receive any compensation for the above work and that volunteers are NOT considered City employees. I understand that volunteer service is not creditable for leave accrual or any other employee benefits. I also understand that either the City or I may cancel this agreement at any time by notifying the other party. I understand that my volunteer position may require a background investigation in order for me to perform my duties. I authorize use of my image (photo, video. etc) in newsletters, brochures, and other program materials.

I do hereby volunteer my services as described a Farmers Market.	pove, to support the mission of the Cann	on Beach
(Signature of Volunteer)	(Date)	
(Signature of Farmers Market Manager)	(Date)	