

# Volunteer Project Packet



# **Volunteer Project Application**

# Complete and submit the Volunteer Project Packet to the Department of Parks & Recreation Ana De Luna at anad@cityofwestsacramento.org

Organization Name:	/: Email: Project Date: am/pm	_ Zip:
Phone:       ( )       Cell:       ( )         Volunteer Clean Up Site Requested:       Site Name/Location:	Email: Project Date: am/pm	
Site Name/Location:	am/pm	
Project Start/End Time:am/pm to         (Request times MUST include set-up)         Type of Event:         Number of Volunteers:Time Volunteers         Primary Project Contact Person:         Name:         Address:City         Phone: ( )Cell: ( )         Secondary Project Contact Person: (This person will be Name:)	am/pm	
Project Start/End Time:am/pm to         (Request times MUST include set-up)         Type of Event:         Number of Volunteers:Time Volunteers         Primary Project Contact Person:         Name:         Address:City         Phone: ( )Cell: ( )         Secondary Project Contact Person: (This person will be Name:)	am/pm	
(Request times MUST include set-up)         Type of Event:         Number of Volunteers:         Time Volunteers:         Time Volunteers:         Primary Project Contact Person:         Name:         Address:       City         Phone:       Cell:         Secondary Project Contact Person:         Name:		
Number of Volunteers:       Time Volunteers         Primary Project Contact Person:       Name:         Name:       City         Address:       City         Phone:       Cell:         Secondary Project Contact Person:       (This person will be Name:		
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Primary Project Contact Person:         Name:         Address:      City         Phone:       ()         Secondary Project Contact Person:       (This person will be Name:		
Name: City Address: City Phone: ( ) Cell: ( ) Secondary Project Contact Person: (This person will be Name:	will arrive:	am/pm
Name: City Address: City Phone: ( ) Cell: ( ) Secondary Project Contact Person: (This person will be Name:		
Address:      City         Phone:       ( )      Cell:       ( )         Secondary Project Contact Person:       (This person will be preson will be	DOB:	
Phone: ( ) Cell: ( ) Secondary Project Contact Person: ( <i>This person will be</i> Name:		
Name:		
Address: City Phone: ( )Cell: ( )	/	_ Zip:
Cell. ( )Cell. ( )		
Please describe in detail, what will occur at this cle	ean up event.	

### Equipment Requests\*

Equipment	Mark X	Quantity	Staff Approved	Equipment Returned
Clean-up Kit (includes vests, trash pickers and bags)				
Dumpster				
Port-a-potty				
Debris Pick-Up				
Parks Staff				

(\*All requests are based on approval and availability)

#### Application Checklist (all boxes must be marked with an "X" if not applicable mark "NA")

Forms to be submitted	Mark X
Volunteer Clean Up Project Application	
Litter Clean-up Equipment Reservation Form	
Volunteer Individual Waiver	
Volunteer Group Roster Waiver	

Organization Name: _		
Organization Signature	zDate:	

City of West Sacramento Parks & Recreation signature below indicates approval of application.

Staff/Department Representative assigned: \_\_\_\_\_

City Staff Signature:	Date:	
Phone:	Title:	

#### Office Use Only

Cubic Feet of Debris Cleaned	
Number of Bags of Debris	
Newsletter Item	



To reserve litter clean-up equipment, complete sections 1-4 of this form and return it to the Department of Parks & Recreation contact Ana De Luna <u>anad@cityofwestsacramento.org</u> prior to your event. **Reservations will be taken on a first come first served basis.** 

1. Litter clean-up ev	ent informatio	n					
Event Date		Conta	ct Nam	ne			
Start Time		Org	anizatio	on			
End Time		Conta	act Ema	ail			
# of People expected		Conta	ct Phor	ne			
Location where litter collection will take place		1					
2. Place a checkmai	k next To the	kit(s) you	would	like to reserv	e.		
<ul> <li>Gear Kit 1</li> <li>20 Grabbers</li> <li>20 Adult Vests</li> <li>Adult Gloves</li> <li>Trash Bags,</li> <li>Buckets</li> </ul>	20 Adu Adult 0 Trash	Kit 2 abbersoGear Kit 3 20 GrabbersJult Vests20 Adult VestsGlovesAdult GlovesBags,Trash Bags,BucketsBuckets		) Grabbers ) Adult Vests dult Gloves rash Bags,	<ul> <li>Kid's Kit</li> <li>20 Short Grabbers</li> <li>7 Adult Grabbers</li> <li>20 Small, 7 Adult Vests</li> <li>Small and Adult gloves</li> <li>Trash Bags, Buckets</li> </ul>		oers dult Vests ult gloves
3. When would you like to pick up litter collection gear kit(s) from City Hall?							
Gear k pick up Dat							
Would you like Greener West Sac re-useable beverage bottles as thank-you gifts for the volunteers? Yes No If yes, how many would you like?				r the			
Any Special Requests?		<u>es, now n</u>					
4. When do you plan to return litter collection gear kit(s)?							
Return Date							
5. Complete this section after the event and return with gear kit(s).							
Actual # People		Phone Number					
Actual # Hours		# Bags Collected		Trash		Recycle	Other
Notes / Other Items F	Picked Up / /G	ear Repa	irs or F	Replacement I	Nee	ded:	



# **Litter Clean-up Event Guidelines**

# A clean city is important, but YOUR SAFETY is more important.

- Ensure everyone participating has signed the City waiver.
- Dress appropriately:
  - Wear sturdy closed-toe shoes.
  - Wear long pants.
  - Wear gloves to protect your hands. (Gloves are included in City gear kit. Any pair you've used is yours to keep at the end of the event.)
  - Wear bright clothes or a vest. (Loaner safety vests are Included in gear kit.)
  - A hat, long sleeves, and sunscreen are recommended.
- Hydrate yourself; Drink plenty of water and takes breaks often.
- Be aware of your surroundings at all times:
  - Watch for cars, buses and bikes.
  - Watch for and avoid wild and domestic animals, snakes, spiders, insects, and poison oak.
- Watch your step:
  - Watch out for barbed wire, sharp metal and broken glass.
  - Watch for trip hazards and unstable soil.
- Never put your hands into an area that is not visible.
- Never handle the following item: Instead call non-emergency dispatch: 916-372-3775 if you encounter:
  - o Firearms
  - Needles
  - Dead animals
  - Chemicals or other unknown substances (please report if leaking or spilled)
  - Or for any safety concerns.

Yellow hazard flags are included in the gear kit to place near any of these identified hazards encountered during your event.

- Keep children and other volunteers in sight while picking up litter.
- Take a count of volunteers at the beginning and end of the event to make sure everyone is present at the end of the event.



# City of West Sacramento Individual Volunteer Application

Activity:

#### Agreement, Waiver, and Release

In consideration for being permitted by the City of West Sacramento to participate in the above activity, I hereby waive, release, and discharge any and all claims for damages for personal injury, death, or property damage which I may have or which may hereafter accrue as a result of my participating in said activity.

This release is intended to discharge in advance the City of West Sacramento ( its officers, employees, or agents ) from and against any and all liability arising out of or connected in any way with my participation in said activity, even though that liability may arise out of negligence or carelessness on the part of the City of West Sacramento ( its officers, employees, or agents ).

I understand that the above activity may be of a hazardous nature and/or strenuous exercise or activity; that serious accidents occasionally occur during the above activity; and that participants in the above activity occasionally sustain mortal or personal injuries and/or property damages as a consequence thereof.

Knowing the risks involved, nevertheless, I have voluntarily applied to participate in said activity and I hereby agree to assume any and all risks of injury or death and to release and hold harmless the City of West Sacramento (its officers, employees, or agents) who through negligence, carelessness, or any other act or omission might otherwise be liable to me.

I further understand and agree that this waiver, release and assumption of risks is to be binding on my heirs and assigns.

I further agree to indemnify and to hold the City of West Sacramento (its officers, employees, or agents) free and harmless from any loss, liability, damage, cost, or expense which they may incur as a result of any injury and/or property damage that I may sustain while participating in said activity.

#### | HAVE CAREFULLY READ THIS AGREEMENT, WAIVER, AND RELEASE AND FULLY UNDERSTAND ITS CONTENTS. AS OF THE DATE OF MY SIGNATURE | AM THE AGE OF 18 OR OLDER. | AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT BETWEEN ME AND THE CITY OF WEST SACRAMENTO AND | SIGN IT OF MY OWN FREE WILL.

#### NAME OF ORGANIZATION (If applicable)

(Please Print):				
VOLUNTEER CONTACT				
		Over 18?: Yes	No	
Signature: Home #:	Cell #:	Email:		
Parent or Guardian Sig	gnature:	Cell #:		

Parent or Guardian signature required if under 18 years of age



# City of West Sacramento Parks & Recreation

Roadside, Parks and Open Space Volunteer Service Program Organization Waiver of Liability

Activity:

#### Agreement, Waiver, and Release

#### Adult (18 & over)

In consideration for being permitted by the above City to participate in the above activity, I hereby waive, release, and discharge any and all claims for damages for personal injury, death, or property damage which I may have or which may hereafter accrue as a result of my participating in said activity.

This release is intended to discharge in advance the above City (its officers, employees, or agents) from and against any and all liability arising out of or connected in any way with my participation in said activity, even though that liability may arise out of negligence or carelessness on the part of said City (its officers, employees, or agents).

I understand that the above activity may be of a hazardous nature and/or strenuous exercise or activity; that serious accidents occasionally occur during the above activity; and that participants in the above activity occasionally sustain mortal or personal injuries and/or property damages as a consequence thereof.

Knowing the risks involved, nevertheless, I have voluntarily applied to participate in said activity and I hereby agree to assume any and all risks of injury or death.

I further understand and agree that this waiver, release and assumption of risks is to be binding on my heirs and assigns.

I further agree to indemnify and to hold the above City (its officers, employees, or agents) free and harmless from any loss, liability, damage, cost, or expense which they may incur as a result of any injury and/or property damage that I may sustain while participating in said activity.

| HAVE CAREFULLY READ THIS AGREEMENT, WAIVER, AND RELEASE AND FULLY UNDERSTAND ITS CONTENTS. AS OF THE DATE OF MY SIGNATURE | AM THE AGE OF 18 OR OLDER. | AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT BETWEEN ME AND THE ABOVE CITY AND | SIGN IT OF MY OWN FREE WILL.

#### NAME OF GROUP OR COMMUNITY ORGANIZATION

(Please Print):				
MAIN VOLUNTEER CONTACT				
Print Name:		DOB:	/	/
Signature:				
Home #:	_ Work #:	C	ell #:	

#### <u>City of West Sacramento Roadside, Parks and Open Space</u> Volunteer Service Program Waiver of Liability/Roster

NAME OF GROUP OR COMMUNITY ORGANIZATION

(Please Print):

I HAVE CAREFULLY READ PAGE ONE (1) OF THIS AGREEMENT, WAIVER, AND RELEASE AND FULLY UNDERSTAND ITS CONTENTS. AS OF THE DATE OF MY SIGNATURE | AM THE AGE OF 18 OR OLDER. | AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT BETWEEN ME AND THE ABOVE CITY AND I SIGN IT OF MY OWN FREE WILL.

#### VOLUNTEERS

Print Name:	DOB:/ Age:
Signature:	Today's Date:
Print Name:	DOB:/ Age:
Signature:	Today's Date:
Print Name:	DOB:/ Age:
Signature:	Today's Date:
Print Name:	DOB:/ Age:
	Today's Date:
Print Name:	DOB:/ Age:
Signature:	Today's Date:
Print Name:	DOB:/ Age:
Signature:	Today's Date:
Print Name:	DOB:/ Age:
	Today's Date:
Print Name:	DOB:/ Age:
	Today's Date: