

Kitsap County Volunteer Agreement and Roster

Please have each Point in Time Count Volunteer fill in information on this form & return with surveys. Thank you!

DATE: LOCATION:

PROJECT/description of activities: 2025 Kitsap Point In Time Count Survey

I have read the above and agree to volunteer for the Project. I understand the activities involved with the Project may contain an element of hazard or risk. I recognize the inherent danger involved and take full responsibility for my actions and physical condition. I hereby release Kitsap County, its employees, officers, directors, and agents from any claims, lawsuits, or actions I, my heirs, or legal representatives may have for any personal injury and/or property damage I may incur as a result of my voluntary services except those damages caused by the sole negligence or willful misconduct of Kitsap County employees. I understand that, but for this release of any and all liability, the County would not accept my offer of volunteering service. I authorize that all necessary first-aid steps may be taken as prescribed by qualified personnel*. I grant full permission to use any photographs, videotapes, recording or any other record of this program for publicity purposes. By signing below, I agree that I understand and consent to the statements above.

Insurance Acknowledgement: I acknowledge Kitsap County provides limited, secondary medical insurance to serve as a supplement to the volunteer's primary medical insurance and will serve as primary coverage only in the event that the volunteer has no medical insurance coverage.

| | _ | Emergency | (Parent signature or attach V-7 if under 18) Signature | Hours | |
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| | Mailing Address | Contact Phone # | | From | To |
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| Kitsap County Staff Project Supervisor | | | | | |
| | Name | Date | Signature | | |
| Safety Orientation if an | pplicable, presented by: | | | | |
| raioty Offentation, if ap | phodoic, presented by. | Staff OR Lead Volunteer Na | ······································ | | |

* At least one volunteer should be first-aid trained.

Submit this completed roster to Cory Derenburger, Housing & Homelessness Division, Kitsap County, 345 6th Street, Suite 400, Bremerton, WA 98337



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