Dear Prospective Volunteer:

Thank for your interest in Riverside County Regional Park and Open-Space District’s Volunteer Services Program. The District preserves, protects, and provides services for residents and non-residents through an assortment of amenities over 80,000 acres of parks and open-space including, but not limited to:

- Archaeological sites
- Historical sites
- Multi-purpose trails
- Nature and visitor centers
- Regional parks
- Sports park and facilities
- Wildlife reserves and natural areas
- Youth boxing club

...and programming of recreational, historic, and natural interpretation opportunities.

There are many benefits to volunteering with the District, which include:

- Making a difference in the community
- Volunteer Shirt
- Meeting new people
- Excess medical and auto insurance
- Free camping opportunities
- Gaining knowledge and learning new skills
- Access to park and nature center locations
- New experiences
- Recognition for volunteerism

Enrollment documents may be returned one of the following ways:

- Return it to one of our District sites
- email to parks-volunteers@rivco.org
- Or mail to the address below
- FAX to (951) 955-4305

Once your application is submitted, a District staff member will be in touch with you to further discuss your opportunities, and a site supervisor will complete an interview with you. Volunteers who pass their interview will be sent the forms to complete their background check, and may begin their official processing into Better Impact, our Volunteer Management Program. Please remember that all volunteers over the age of fourteen (14) must complete a criminal history background check. There is no cost to the volunteer. The enclosed enrollment packet consists of the following:

- Volunteer Information Form
- Volunteer Assignment Acknowledgement Form
- Standard Release Form

If you have any questions, please do not hesitate to contact us by email, Parks-Volunteers@rivco.org, or by Phone, (951) 955-4310. You can also learn more on our website at www.rivcoparks.org. We look forward to you becoming a team member of Riverside County Regional Park and Open-Space District.
**Volunteer Information Form**

**APPLICANT AND VOLUNTEER ASSIGNMENT INFORMATION (Please Print)**

<table>
<thead>
<tr>
<th>Last Name</th>
<th>First</th>
<th>Middle</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Home Address</th>
<th>Apt/Bldg</th>
<th>City</th>
<th>State</th>
<th>Zip Code</th>
</tr>
</thead>
<tbody>
<tr>
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</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Home Phone</th>
<th>Cell Phone</th>
<th>Fax</th>
<th>E-Mail Address</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
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</tr>
</tbody>
</table>

**Are you over 18 years of age?**

- [ ] Yes
- [x] No

If no, what is your birthdate? __/__/____

If you are under 18 years of age, please complete all volunteer forms with your parent or guardian and add them to the emergency contact information below.

**EMERGENCY CONTACT INFORMATION (Please Print)**

<table>
<thead>
<tr>
<th>Name</th>
<th>Relationship</th>
<th>Primary Phone</th>
<th>Secondary Phone</th>
<th>E-Mail Address</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<td></td>
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</tbody>
</table>

**Mailing Address**

**HOW WOULD YOU LIKE TO VOLUNTEER?**

<table>
<thead>
<tr>
<th>Live on-site in a Park or Open-Space</th>
<th>Live at Home</th>
<th>Where to you want to volunteer?</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ Camp Host</td>
<td>☐ Nature or Visitor’s Center</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Live in your own RV/Trailer</td>
<td>☐ Open-Space</td>
</tr>
<tr>
<td>☐ Resident Caretaker</td>
<td>☐ Parks</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Live in one of our houses</td>
<td>☐ Recreation</td>
</tr>
<tr>
<td></td>
<td></td>
<td>☐ Other:</td>
</tr>
</tbody>
</table>

A “yes answer to the following question does not necessarily disqualify an applicant.

**Have you ever been convicted of a felony or misdemeanor?**

- [ ] No
- [x] Yes

If yes, please explain:

**Note:** Background screenings indicating any automatic disqualifiers or failure to disclose previous conviction will preclude the candidate from Riverside County Regional Park and Open-Space District, Volunteer Services Program.

In an effort to assure your safety and the safety of employees, volunteers, Parks customers, RivCoParks requires that all employees and volunteers complete a background check prior to employment or volunteer assignment.

By my signature below, I declare that all written information contained within this application is true. I understand that falsification of information is grounds for disqualification and/or immediate dismissal. I authorize investigation of all statements contained in this application and my support documents. I authorize the County and any of its agents to verify any information on this application and I authorize release of any such information. I hereby release the County from any liability arising from this investigation.

_______________________________________________
Applicant Signature

_______________________
Date

_______________________________________________
Parent/Guardian Signature (for minor applicants)

_______________________
Date
Submit this form and direct any questions you have about volunteering to the Human Resources/Volunteer Services: Deborah Newell (951) 955-2264.

SECTION 1 – COUNTY DEPARTMENT INFORMATION

<table>
<thead>
<tr>
<th>County Department Name</th>
<th>Department Division/Office/Program</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Regional Park and Open-Space District</td>
<td>Volunteer Services Program</td>
<td></td>
</tr>
</tbody>
</table>

**Volunteer’s Name**

**Volunteer Assignment Title or Description**

**Volunteer Assignment Location**

**Volunteer’s Email**

**Volunteer’s Phone**

SECTION 2 – VOLUNTEER ACKNOWLEDGMENT

As a volunteer, I acknowledge, understand and agree to the following:

- A "volunteer" means a person who performs authorized voluntary service to County of Riverside, or a department, institution or agency thereof, without pay, for the benefit of the County and in aid of a recognized County purpose. A volunteer is not an employee and may be released at any time, without cause or reason, and without right of appeal.

- I may not volunteer while my ability to perform my duties is impaired due to alcohol or drug use. I may not use or possess controlled substances at any time or use alcohol while on duty or on County property. If taking medication which may affect my performance of duties, I must report this to the County department/agency's volunteer coordinator/program manager before beginning my assignment.

- I will not disclose at any time confidential information to which I have access during my assignment as a volunteer with the County of Riverside. This information includes, but is not limited to, medical records or files, vital records, and statistics. I will also strictly protect the confidentiality of all County employee/personnel information to which I have access. I am required by State and/or Federal law to maintain confidentiality and that failure to uphold this requirement may result in immediate release.

- In the event of a volunteer assignment-related injury or illness, it is my responsibility to notify my volunteer assignment supervisor immediately. If my volunteer assignment supervisor is unavailable, I will contact the County department/agency's volunteer coordinator/program manager to report my volunteer assignment-related injury or illness.

- Prior to driving my personal vehicle or a County vehicle during volunteer assignment hours, I must contact my volunteer assignment supervisor for approval. I will need to complete the “Authorization to Drive” form and also provide a current DMV printout, my unexpired drivers' license and proof of automobile insurance. While driving my own personal vehicle my auto insurance shall be primary while in the course and scope of my assignment with the County of Riverside.

- My failure to report to a scheduled volunteer assignment without contacting my assignment supervisor may result in immediate release.

- I agree to act appropriately and in a professional, courteous manner during my participation in District programs and events. I will not misuse public facilities, property or materials. I am fully and solely responsible for any and all loss or damage that I inflict upon any person or upon the public facilities during my participation, and I will compensate the District for any loss sustained as a consequence of my negligence, reckless behavior, or omission.
MEDIA RELEASE:

By signing this form, I hereby grant the County of Riverside permission to make video recordings, audio recordings, take still photographs of me or use statements I make for purposes of marketing, recruitment or any other purpose deemed suitable to the County of Riverside.

I acknowledge the County of Riverside’s ownership of any edited program, marketing project, advertisement, etc. and all its constituent elements (photos, video footage, sound tracks, etc.) which include my statements, name or image. I hereby license the County of Riverside, for any purpose, to exhibit photos via any medium, including but not limited to, television broadcast, cablecast, closed-circuit showing, Internet, print and distribution on videocassette.

I license the County of Riverside to use any and all said recordings, statements, photos and videos of me. I hereby renounce any form of compensation, now or in the future, for my participation or performance.

VOLUNTEER INSURANCE PROGRAM:

I have also read and understand the information provided to me on the Volunteer Insurance Program. I understand the County of Riverside does not provide Workers’ Compensation Insurance to volunteers.

I understand the County of Riverside provides liability insurance while in the course and scope of the volunteer’s activity/responsibility except, but not limited to, the following:

- Willful, wanton acts.
- Abuse, sexual abuse, assault and battery.
- Acts/activities not within the course and scope of the volunteers’ activities/responsibilities.

I also understand that if I have further questions regarding the Volunteer Insurance Program, I may contact the Human Resources Department’s Risk Management Division by phone, (951) 955-3540, or by mail at P.O. Box 1120, Riverside, CA 92502-1120.

PARKING:

Additionally, I know that volunteers are to park their private vehicles in the Public Parking areas at all County Facilities and that the County of Riverside is not responsible for the payment of fines resulting from parking in County employee’s parking spaces per the County of Riverside’s Administrative Policy.

Applicant Signature ___________________________ Date _____________

Applicant Name Printed ___________________________

If participation/performance is by a minor (under age 18): “I guarantee participation/performance of this agreement by my child.”

Parent/Guardian Signature (for minor applicants) ___________________________ Date _____________

Parent/Guardian Name Printed ___________________________