



## Merrimack County Conservation District Volunteer Form

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Are you over the age of 18\*? \_\_\_\_\_

**Times available to volunteer:**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### Areas of Interest:

- Sorting/packaging bulbs and/or bare root plants
- Assembling mailings
- Assisting at school events or community events
- Field work (plantings, Cottontail Rabbit tracking, invasive plant removal, etc.)
- Helping at workshops (registration, setting up refreshments, etc.)
- Gleaning Program (collecting food from farms for food pantries)

*Please use the back of this form to provide any other relevant information you would like the MCCD to have pertaining to you becoming a volunteer.*

\*If under 18 years of age, a parent or guardian must sign this form to give permission to participate in a volunteer capacity.

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Parent/Guardian Signature

Date

*The Merrimack County Conservation District prohibits discrimination in its programs on the basis of race, color, national origin, sex, religion, age, disability, political beliefs and marital or familial status.*

## Thank you!



## Volunteer Agreement

Merrimack County Conservation District (MCCD) greatly appreciates the dedicated service of volunteers. Our programs would be unable to flourish without your help! The following policies have been developed to ensure you a safe, productive and rewarding volunteer experience at MCCD. Please read and sign at the bottom of the following page.

### **Attendance**

Volunteers are requested to arrive promptly for their volunteer assignment, or notify MCCD in advance if they are unable to come in at their scheduled time. This will allow MCCD to make necessary accommodations in your absence.

### **Confidentiality**

Volunteers shall keep all information confidential, in whatever form, produced, prepared, observed, or received by the volunteer to the extent that such information is confidential by law.

### **Safety**

Merrimack County Conservation District maintains a drug and alcohol free work environment in all aspects and reaches of its programs. Volunteers who abuse alcohol or drugs are a danger to themselves and others, and will *not* be permitted to continue as MCCD volunteers.

*Volunteers are expected to:*

- ✓ Wear suitable clothing. Certain volunteer activities require time spent outdoors and volunteers should dress accordingly.
- ✓ Immediately report any injuries to MCCD staff.
- ✓ Bring only what is needed. MCCD is not responsible for any lost or stolen items.
- ✓ Follow supervision and direction of MCCD staff.

As a volunteer, I agree to abide by all applicable rules and regulation of MCCD and to fulfill the volunteer responsibilities to the best of my ability. I understand that I will receive no monetary benefits in return for the volunteer service I provide. I understand that MCCD reserves the right to reassign, reschedule, or discontinue a volunteer's term of service at any time and for any reason.

I certify that I have read and understand the guidelines contained in Merrimack County Conservation District's Volunteer Agreement. I intend to follow the above guidelines and understand that my continued service will be contingent upon my ability to work productively and safely within these guidelines.

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Legal Signature

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Date



VOLUNTEER LIABILITY WAIVER AGREEMENT

All volunteers of *Merrimack County Conservation District* and its programs must completely read and sign this Liability Waiver and Emergency Contact information prior to starting work. We deeply appreciate your services and want to indicate our commitment to do the very best to assist you in your volunteer efforts.

**Volunteer Agreement:** In signing this Liability Waiver, I agree that I am willingly volunteering with Merrimack County Conservation District and its programs. I agree to work in a safe and responsible manner. I agree to only perform work that I am comfortable doing and that I feel I can accomplish safely. If I am not comfortable with a task I will immediately notify MCCD staff. I agree I am wearing proper clothes and shoes that I believe will provide protection according to the work conditions. \_\_\_\_\_ **(Initials)**

**Release:** I hereby release Merrimack County Conservation District, any and all sponsoring organizations or partners, and property owners from any and all claims that may arise from or result in any expenses, personal injury, loss or damage incurred to me or by me during my participation with the Merrimack County Conservation District. \_\_\_\_\_ **(Initials)**

**Photo Release:**

Do you consent to film, photo, or video that may be taken of you while you are volunteering with MCCD to be used by MCCD or any of its participating agencies for publicity and/or advertising? By agreeing to this you are releasing MCCD and its agencies from any liability in connection with the use of these materials.

YES or NO. Please circle one.

**Information Waiver:** I understand that any information I choose to provide Merrimack County Conservation District will be held in confidence and that MCCD and its programs may use and reproduce anonymously compiled survey results, including any information I may have provided, for purposes of program evaluation, communication and publication. \_\_\_\_\_ **(Initials)**

Volunteer's Name (Please Print) \_\_\_\_\_

Volunteer's Signature of Agreement \_\_\_\_\_

\_\_\_\_\_ Date

**Emergency Contact Information**

In case of an emergency, please contact \_\_\_\_\_  
Telephone Number (s) \_\_\_\_\_ Relationship \_\_\_\_\_