



Streamkeepers of Clallam County Volunteer Group Registration Agreement/Time Record

Date(s) of Service: see back

Group Leader(s): _____	Group Name: STREAMKEEPERS OF CLALLAM COUNTY
Project: SK Regular / Other (specify): _____	Address: 223 E. 4 th ST, SUITE 5, PORT ANGELES, WA 98362
Sites or vicinity: _____	County Supervisors: ED CHADD & ROBERT KNAPP
Type of Work (circle): field / office / home / community	Work Phone: 360-417-2281
	E-mail: streamkeepers@co.clallam.wa.us
	Department: COMMUNITY DEVELOPMENT

Representations: Volunteer desires to have the opportunity to perform a public service and to enhance personal growth providing assistance to the County. County agrees to provide Volunteer with the opportunity to perform public service provided that the following terms and conditions are met.

Agreement: As a registered volunteer for Clallam County, the volunteer agrees to:

- perform the volunteer service as provided for in this agreement with direction and supervision from the County and in compliance with all applicable rules, regulations, and laws.
- submit complete and accurate record of all time spent in volunteer service, including date of service and position held in accordance with department standards.
- indemnify and hold the County harmless from any negligent action on the part of Volunteer in the performance of the service provided for in this agreement.
- certify that he/she has taken all necessary precautions to be certain that he/she is in proper condition, and states that he/she is in proper condition to participate in the above described duties.

The county shall provide State Industrial Insurance through its self-insured program for any covered injury or illness that may occur while Volunteer is performing service as provided herein.

