

Volunteer Agreement Form

Dear Volunteer,

We are excited to have you join the ArtSideOut 2017 team! The following will clarify the expectations of both parties to ensure a safe, productive, and rewarding volunteer experience.

The ArtSideOut Team commits to providing adequate orientation, training, and support to meet the expectations as outlined in the volunteer role description. We aim to make a welcoming, comfortable, and engaging environment for our volunteers. We promise to be receptive to any comments and feedback from all volunteers, and to recognize our volunteers as significant resources in achieving the goals and agenda of ArtSideOut.

Please read and sign the following terms of the ArtSideOut 2017 Volunteer Agreement:

I, _____, as a volunteer for ArtSideOut 2017, hereby agree to dedicate my time and effort to ArtSideOut. I agree to participate as a volunteer throughout the work term outlined in the Volunteer Application Form as agreed upon between myself and the Volunteer Director. I understand that in order to meet the expectations of my volunteer placement, I must attend orientation and training requirements specific to my particular role. I understand that I will not receive monetary compensation for the services contributed, and that I must assume a minimal monetary cost for transportation. I release ArtSideOut and University of Toronto from any and all liabilities related to or arising from my service as a volunteer.

This Volunteer Agreement Form shall remain effective throughout the work period as outlined in the Volunteer Application Form. This volunteer agreement is binding in honour only, and is not intended to be a legally binding contract between the volunteer and the organization. Neither party intends any employment relationship to be created now or at any time in the future. This agreement may be cancelled at any time at the discretion of either party.

By completing the information below, I agree to have read, understood, and accept the terms above.

(Volunteer) (Parent/Guardian if under age 18)	(Signature)	(Date)
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Mauriene Jean Tolentino (Volunteer Director)	(Signature)	(Date)
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Emergency Contact

This information will be extremely important in the event of an accident and/or medical emergency.

Name:	Phone:
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Relationship with volunteer:

Signature:	Date:
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