AUTHORIZED SECONDARY ATHLETICS/ACTIVITIES VOLUNTEER AGREEMENT

Adams 12 Five Star Schools, hereinafter called the District, and ____________________________, hereafter called Volunteer, hereby agree as follows:

1. The District hereby contracts with Volunteer for the period commencing ________________, 20_____, and ending _____________________, 20_____.

2. Volunteer understands and agrees that he/she will not receive monetary compensation for services rendered to the District.

3. Volunteer shall be under supervision of the athletic director/head coach/activities director/principal. Volunteer agrees to perform such services and assignments as directed by and in accordance with the requirements of the school's athletic director/head coach/activities director/principal, all District policies, and all state and federal laws.

4. Volunteer shall assist one or more certificated coaches or teachers in the instruction, direction and supervision of students in the assigned sport or activity.

5. Volunteer understands that worker's compensation laws do not apply to this agreement and that the District shall have no obligation to pay for any medical treatment, lost wages, or other loss suffered by Volunteer while providing these volunteer services.

6. The Volunteer hereby authorizes the District to conduct a registered sex offender screening of the Volunteer and such further background/reference checks as the District deems appropriate.

7. This contract may be terminated by either party upon five (5) days written notice.

8. Volunteer agrees to indemnify, save, and hold harmless the District against any and all claims, losses, injuries, damages, expenses, liability and court awards including costs, expenses, and attorney fees incurred as a result of any act or omission by the Volunteer.

ATTEST:

____________________________________  Date: ______________________________
Volunteer

Staff Use Only:

RAPTOR Check: ______________________  Date: ______________________________

By: ________________________________
Athletic Director / Activities Director / Principal

______________________________ School  Date: ______________________________

By: ________________________________  Date: ______________________________
District Athletic Director (if applicable)

Approved: __________

Follow up requested: ________