

## VOLUNTEER AGREEMENT

Welcome to the Benton County Sheriff's Office! You can be proud of being accepted into volunteer service as we hold high standards for all members, both employees and volunteers. Toward that end, persons voluntarily performing non-compensated services for the Benton County Sheriff's Office are asked to carefully read and sign this Volunteer Agreement for Non-Compensated Services. Again, thank you for volunteering your skills, energy, and commitment in service to the community. We hope it will be a positive experience for you!

I, \_\_\_\_\_ (print name) agree to the provisions listed below in providing non-compensated, volunteer services to the Benton County Sheriff's Office (BCSO). This Agreement will be in effect for the duration of my volunteer services with the BCSO.

**Personal Conduct:** I acknowledge that as a volunteer with the Benton County Sheriff's Office, my actions reflect on the public image of the Office and I vow to conduct myself in an ethical and lawful manner both on and off duty. I will uphold the public trust, shall not use my position to gain favor or preferential treatment, and will avoid any real or perceived conflicts of interest.

**Confidentiality:** Much of the information encountered during volunteer service at the BCSO is sensitive and must remain confidential. I agree to respect confidential communication and not to discuss or disclose it to anyone outside of the Sheriff's Office or my Volunteer Unit.

**Use of Vehicles:** If my assignment includes driving a motor vehicle, I agree to abide by Benton County's Motor Pool and Fleet Policy. My signature below authorizes the BCSO to obtain a copy of my Oregon Department of Motor Vehicles Driving Record for the purpose of driving County vehicles. If I am authorized to drive my personal vehicle while performing BCSO volunteer duties, I affirm that I have and will maintain insurance coverage as required by the State of Oregon and that I understand that my private insurance is the primary insurance coverage for my personal vehicle, even when performing volunteer duties.

**Waiver & Hold Harmless:** I am fully aware that work associated with being a BCSO volunteer may involve certain risks of physical injury or death. I assume all risk of injury, damage, and harm arising from such activities or use of BCSO facilities. I release and hold harmless the BCSO, Benton County, its officials, employees, and agents and I waive any right of recovery that might bring a claim or lawsuit against them for any personal injury, death, or other consequences arising out of my volunteer activities. I understand that a limited amount of accident and injury insurance coverage and liability insurance may be provided by Benton County for volunteer members of the BCSO. I understand these apply only when performing duties within the scope of my volunteer service.

I understand that I am providing volunteer services to BCSO at the discretion of the Sheriff.

\_\_\_\_\_  
Volunteer Signature

\_\_\_\_\_  
date

\_\_\_\_\_  
BCSO Representative/Witness Signature

\_\_\_\_\_  
date