

**Fish and Wildlife Day Volunteer Service Agreement**

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**INSERT State Park or DEC region  
 and address**



**Parks, Recreation  
 and Historic  
 Preservation**

**Department of  
 Environmental  
 Conservation**

**Please Print**

<b>Name:</b>	<b>Address:</b>
<b>Phone:</b>	<b>City/State/Zip:</b>
<b>Location/Facility</b>	<b>Date of Service:</b> Sept ____, 20____

**Are you 18 years of age or older?**     Yes     No    **If no, state age: \_\_\_\_\_**

**(Parent or guardian must sign below if under 18)**

<b>Description of Volunteer Service:</b>
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**In case of Emergency Notify:**

<b>Name:</b>	<b>Address:</b>
<b>Phone:</b>	<b>City/State/Zip:</b>

I certify, to the best of my knowledge, that the statements I have made are true and correct. I understand that the volunteer services described above are to be performed at no cost to the state. I will be required to comply with all regulations of the Office of Parks, Recreation & Historic Preservation ("OPRHP") or the Department of Environmental Conservation ("DEC"), dependent on the event location, and the regulations and procedures of the \_\_\_\_\_ Region.

The \_\_\_\_\_ Region of OPRHP or DEC agrees, during the period of service, to provide for the volunteer Worker's Compensation coverage to the extent provided by law. If I am injured, I agree to promptly notify OPRHP or DEC and OPRHP or DEC, dependent on the event location, shall process my claim under the Worker's Compensation Law. As a volunteer I may be entitled to defense and indemnification pursuant to the Public Officers Law § 17. I agree to immediately notify Counsel's Office at (OPRHP) 518-486-2921 or (DEC) 518-402-9185 should I require such defense and indemnification. The personal information on this form will be treated as private pursuant to the Personal Privacy Protection Act.

<b>If you are not 18 years of age or older, a parent or guardian must complete the following statement:</b>	
I have read the Volunteer Services Agreement and confirm that _____ has my permission to participate as a volunteer in the program described for the _____ Region.	
<b>Signature of Parent or Guardian</b>	<b>Date</b>

This form is valid for the calendar year in which it is signed if it is being used for multiple volunteer days.