



STEELE COUNTY EMERGENCY MANAGEMENT

Volunteer Registration

Last Name	
First Name	

Approved Organizations

Organization	Leader Approval	Approval Date	Badge No.	Expiration Date
			74- -	mm yyyy
			74- -	mm yyyy
			74- -	mm yyyy
			74- -	mm yyyy
			74- -	mm yyyy
			74- -	mm yyyy

Approval Routing

Routing after Leader Approvals	Initial	Date	Attach Photo Image Here
	1. Director Preapproval		
2. Background Check			
3. Director Final Approval			
4. Recorder (Badges)			
5. SCEM File			
Photo File Name (photo files should not exceed 1MB) lastname.firstname.jpg			

Miscellaneous Notes



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The information requested here is required:

1. To provide Steele County Emergency Management the ability to contact you.
2. To provide Steele County Emergency Management an alternate contact in the unlikely event of an injury or illness to you.

Please print this information clearly to enhance the reliability of it being read properly.

Your Personal Contact Information

Legal Last Name		Suffix	Sr, Jr, III	
Legal First Name		Middle Initial		
Common First Name		Birthdate	mm	dd
Home Address / Apt. No.				
City, State, Zip Code				
E-Mail Address				
E-Mail Address				
Phone Numbers	home	cell		
Phone Numbers	work	other		

Emergency Contact Information

Note: You agree to the release of information to the individual(s) listed below.				
Name				
Relationship				
Street Address / Apt. No.				
City, State, Zip Code				
Phone Numbers	1st	2nd		
Name				
Relationship				
Street Address / Apt. No.				
City, State, Zip Code				
Phone Numbers	1st	2nd		

Other Personal Information



STEELE COUNTY EMERGENCY MANAGEMENT

Hold Harmless and Permission Request

I, _____, hereby request permission to participate in Steele County volunteer program(s). I am aware that I may be involved in hazardous activities and that I could be seriously injured. I am voluntarily participating in these activities with knowledge of the danger involved, and agree to assume any and all risks of bodily injury, death or property damage, whether those risks are known or unknown.

I also understand that:

- 1 I will be under the direction of the Steele County Emergency Manager, or designee.
- 2 **As a Volunteer, I am NOT acting as an employee of Steele County.**
- 3 To be eligible for the County's liability medical insurance of the workers' compensation program, I must be properly logged into events.
- 4 Personal equipment (vehicles, tools, clothing, etc.) is my sole responsibility. Repair or replacement of personal equipment is at my own expense.
- 5 I will follow established rules and procedures, exercise reasonable care, and use common sense while participating in volunteer activities. I understand that if I fail to follow the organization rules and regulations or if I fail to exercise reasonable care, I can be removed from the program.
- 6 I am solely responsible for my personal well being and safety. If I observe any unusual or significant hazard, I will remove myself from participation and bring such hazard or risk to the attention of Steele County Emergency Management.
- 7 I grant Steele County Emergency Management all right, title and interest in any and all photographic images and video or audio recordings made by Steele County Emergency Management during my volunteer activities.
- 8 I agree to submit to a criminal background check. I may be denied acceptance in the volunteer program based on the results of the background check.

By executing this release I certify that I have read this release in its entirety, understand all of its terms and have had any questions regarding the release or its effect satisfactorily answered. I sign this release freely and voluntarily.

Signature

Date