

NH Broadband Rural Addressing Project Volunteer Application

Name:			
Address:			
Phone:			
Email:			
Emergency Contact:			
Emergency Phone:			
Summarize other volunteer experiences (provide organization name and contact #):			
How did you hear about this volunteer opportunity?			
Why are you interested in volunteering for this program?			

Are you open to volunteering anywhere in the region or only for a specific municipality?
Do you have a valid Driver's License?
Do you have vehicle insurance that would cover any injuries or vehicle expenses while participating as a volunteer?
Please provide three non-family member references and contact information:
1.
2.
3.



Rural Addressing – Broadband Mapping Program

Volunteer Agreement and Consent Form

١,	, agree to serve as a volunteer and commit to the
followir	
	To perform volunteer duties to the best of my ability. To adhere to the organization's rules, policies and procedures, including record-keeping
3.	requirements and confidentiality if necessary. To meet time and duty commitments, or to provide adequate notice so that alternate arrangements can be made.
4.	To notify the Commission in the event that I choose to discontinue my volunteer efforts.
any issu	stand there are inherent risks in walking and driving. Reasonable efforts will be made to monitor les that arise but I understand that I will be responsible for my own transportation and ments to get to sites within the region.
particip	that I have vehicle insurance that would cover any injuries or vehicle expenses while ating as a volunteer and to the extent that any of my medical expenses are not covered by my ce, I agree to be responsible for my own medical and vehicle expenses.
	stand that I am required to wear a seat belt when driving while engaged in any volunteer duties alf of the Upper Valley Lake Sunapee Regional Planning Commission (Commission).
employ claims,	read and understood the above, I release and agree to hold harmless the Commission, its agents ees and other volunteers, from and against any and all loss, personal injuries, property damage, liability, costs and expenses of any nature whatsoever, including, without limitation, attorney's d disbursements (collectively, "Losses"), arising from or occasioned by my participation as a er.
I also ad	knowledge the Commission may terminate my services at any time.
AGREED	OTO:
Volunte	eer Date

The Upper Valley Lake Sunapee Regional Planning Comn	hission agrees to accept the services of
as a volunteer beginni	ng and we commit
the following:	
 To provide accurate information, training, GPS e To ensure supervision and provide job assessme To respect the skills and individual needs of the 	nt feedback.
Christine Walker, Executive Director	Date