

OHS VOLUNTEER CORPS APPLICATION



Office of
Homeless Solutions

I. Applicant Information

Last name _____ First name _____ Middle name _____

Date of birth ____ / ____ / ____ Address _____

City _____ Zip code _____ Cell phone _____

Other phone _____ Email _____

II. Volunteering Availability

Day(s):

Mondays Times available _____ Fridays Times available _____

Tuesdays Times available _____ Saturdays Times available _____

Wednesdays Times available _____ Sundays Times available _____

Thursdays Times available _____

III. Volunteer Interests

Temporary Inclement Weather Sheltering

Advocacy

Other

IV. Emergency Contact Information

Name _____ Telephone _____ Relationship _____

Name _____ Telephone _____ Relationship _____

Name _____ Telephone _____ Relationship _____

CITY OF DALLAS
HOMELESS SOLUTIONS VOLUNTEER CORPS
ACKNOWLEDGEMENT OF RESPONSIBILITY, RELEASE OF LIABILITY, AND MAINTAINING
CONFIDENTIALITY

I, _____, apply to serve as a participant in the Office of Homeless Solutions Volunteer Corps ("OHS Volunteer Corps") and volunteer for the City of Dallas ("City").

RELEASE OF LIABILITY

I understand that, while my safety and the safety of students is a high priority for the City and OHS Volunteer Corps, and that I will receive specific safety instructions, training, and equipment for use in this Volunteer Opportunity, I acknowledge that the City of Dallas will not be responsible for my safety during my participation or for any medical costs associated with injury to me or for any damages, including my death or disability associated with an accident while participating. I further acknowledge that I am acting solely in the capacity of a volunteer, and I am not an employee, officer, or agent of the City of Dallas and am therefore not covered by workers' compensation.

I also acknowledge and agree to maintain the confidentiality of any information I may obtain during my work as a volunteer and understand that my work and communication regarding City business are subject to open records requests.

All members of the OHS Volunteer Corps must sign this release of liability. In the event of an injury volunteer, the City of Dallas (or any employee of the City), will not be held responsible.

I recognize that there are certain inherent risks associated with the above-described activity, and that accidents resulting in personal injury and property damage sometimes occur during participation in the activities described above and particularly can occur while I am participating in any volunteer activities. **I have been warned of the risks and dangers and assume full responsibility for personal injury to my myself. I agree and acknowledge that I am under no pressure or duress to sign this Release and acknowledge that I have been given reasonable opportunity to review it before signing. I am making an informed decision to voluntarily participate in the OHS Volunteer Corps at my own risk, and I release and discharge the City of Dallas for injury, loss, damages, liabilities, costs, or expenses arising out of my participation in the OHS Volunteer Corps.**

IN CONSIDERATION OF MY BEING ALLOWED TO PARTICIPATE IN THE VOLUNTEER OPPORTUNITY, I EXPRESSLY RELEASE DISCHARGE AND COVENANT NOT TO SUE THE CITY OF DALLAS, ITS CITY MANAGER, CITY COUNCIL, OFFICERS AND EMPLOYEES AND ITS CONTRACTOR, ALL CITY MANAGEMENT SERVICES, INC. AND ITS DIRECTORS, OFFICERS AND EMPLOYEES ("RELEASEES"), AND I AGREE TO HOLD HARMLESS FROM AND WAIVE AGAINST THE RELEASEES, ANY AND ALL CLAIMS FOR MEDICAL EXPENSES, LOSS OF SERVICES, INJURY TO PERSON OR PROPERTY, DEATH, OR OTHER CLAIMS, ACTIONS, OR LIABILITIES MADE BY ME OR ON MY BEHALF BY MY HEIRS, PERSONAL REPRESENTATIVES, ESTATE OR ANY OTHER PERSON OR ORGANIZATION SEEKING TO ACT FOR ME, REGARDLESS OF THE CAUSE OF SUCH CLAIMS, ACTIONS, OR LIABILITIES OR ANY CONCURRENT OR CONTRIBUTING FAULT OR NEGLIGENCE OF THE CITY AS SUCH MAY RESULT FROM MY PARTICIPATION IN THE VOLUNTEER OPPORTUNITY.

IN FURTHER CONSIDERATION FOR MY PARTICIPATION IN THE VOLUNTEER OPPORTUNITY, I ALSO AGREE TO INDEMNIFY AND HOLD HARMLESS THE CITY OF DALLAS AND ITS CITY MANAGER, CITY COUNCIL, OFFICERS AND EMPLOYEES AND ITS CONTRACTOR, ALL CITY MANAGEMENT SERVICES, INC. AND ITS DIRECTORS, OFFICERS AND EMPLOYEES, FROM AND AGAINST ANY AND ALL SUITS, ACTIONS, LOSSES, DAMAGES, CLAIMS, OR LIABILITIES OF ANY CHARACTER, TYPE, OR DESCRIPTION, INCLUDING ATTORNEY'S FEES AND COURT COSTS, MADE BY THIRD PARTIES AGAINST THE CITY OR ACMS WHICH MAY RESULT FROM MY ACTIONS, WHETHER SOLELY, CONCURRENTLY, OR CONTRIBUTING, AS A VOLUNTEER PARTICIPATING IN THE VOLUNTEER OPPORTUNITY. I UNDERSTAND THAT THE CITY OF DALLAS AND ITS CITYS MANAGER, CITY COUNCIL, OFFICERS AND EMPLOYEES ARE NOT WAIVING THEIR ENTITLEMENT TO ANY SOVEREIGN OR GOVERNMENTAL IMMUNITY OR OFFICIAL IMMUNITY UNDER TEXAS LAW.

I HAVE READ AND UNDERSTAND THIS RELEASE AND SIGN IT VOLUNTARILY AND WITH FULL KNOWLEDGE OF ITS SIGNIFICANCE. I UNDERSTAND THAT I AM GIVING UP SUBSTANTIAL LEGAL RIGHTS BY SIGNING THIS RELEASE, HAVE SIGNED IT VOLUNTARILY AND WITHOUT ANY INDUCEMENT OR ASSURANCE OF ANY NATURE AND INTEND IT TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW. I AGREE THAT THE INVALIDITY OR UNENFORCEABILITY OF ANY PORTION OF THIS RELEASE SHALL NOT AFFECT THE VALIDITY AND ENFORCEABILITY OF ANY OTHER PORTION OF THE RELEASE, AND THE BALANCE OF THE RELEASE SHALL CONTINUE IN FULL FORCE AND EFFECT.

I UNDERSTAND AND AGREE THAT ANY CONTROVERSIES OR DISPUTES ARISING OUT OF OR RELATING TO THIS RELEASE SHALL BE GOVERNED BY THE LAWS OF THE STATE OF TEXAS.

Signature of Volunteer Participant _____

Printed Name of Volunteer Participant _____

Date Signed _____

**THE STATE OF TEXAS
COUNTY OF DALLAS**

BEFORE ME, the undersigned, a Notary Public in and for said County and State, on this day personally appeared _____, known to me to be the person whose name is subscribed to the foregoing instrument, and acknowledged to me that he/she executed the same for the purpose and consideration there in expressed.

GIVEN UNDER MY HAND AND SEAL OF OFFICE, this _____ day of _____
A.D. 20_____.

Notary Public in and for Dallas County, Texas

My Commission Expires: _____