



Agreement Form

The Celtic Cultures Alliance of the Quad Cities

2013 Volunteer Agreement

Volunteer Name _____

Phone Number _____

E-mail Address _____

Mailing Address _____

Emergency Contact _____

Phone Number _____

As a Celtic Festival and Highland Games Volunteer, I will:

1. Arrive on time for my shift and remain until the team leader releases me or the assigned volunteer for the next shift arrives, whichever comes first.
2. Complete my duties to the best of my ability.
3. Notify my area team leader in case of an emergency.
4. Observe the rules and policies of both the Celtic Cultures Alliance of the Quad Cities and the Davenport Parks and Recreation.
5. Turn in my completed and signed volunteer time card and survey to the Celtic Cultures Alliance Volunteer tent when my last shift ends.
6. Follow the directions of my team leader and ask for assistance when I don't understand.
7. Assume full responsibility for my volunteer participation (I accept the physical risk of volunteering for the duties accepted).

Signature of Volunteer

Date

Signature of Parent or Guardian (if under 18 years old)

Date

Authorized CCA of the QC Representative

Date