



FOR OFFICE USE ONLY						
Station(s)						
Assignment(s)						
Date Assigned:///						
Computer Entry://						
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## Davis County RSVP Enrollment Form

Please print and complete all sections. Forms with original signatures are required for enrollment.

Name			Birth Date			
Mailing Address		Cit	У	ZIP		
Phone	Cell Phone		_Email			
This section is optional Male Female		AsianA Indian/Alaska Nati	frican-america	an <u> </u>	nic/Latino	
Are you a Veteran		Are you an active I	Military Memb	oer Yes	No	
Are Any of your family r						
Physical/Medical Limit	tations:					
Special skills/Interests/L	anguages					
Volunteer Interest						
Availability:Sun				Mornings	Afternoons	
Have you ever been co attach an explanation included with this applic RSVP provides mileag Will you be claiming a If Yes, is a copy of yo	of charges, date ation. e reimbursement i mileage reimburse	of offense, and sta for travel between h ement? <b>Yes</b>	atus of the ch nome and volu <b>No</b>	narges on a separ inteer site.	ate sheet to be	
Driver's License #			State E	xpiration Date		
As an RSVP volunteer, benefit while performing are an active, enrolled r	volunteer duties	. This coverage is a	automatic and	free of cost to you		
Emergency Contact:			Phon	e:		
Relationship:						
Beneficiary for RSVP	Supplemental Ac	cident Insurance:				
Name:		Relationship	:			
Address:			Phone:			

## Please indicate if RSVP may have permission to use your likeness? (check one)

\_\_\_\_\_ I hereby grant Davis County RSVP permission to use my likeness in photograph(s)/video(s) in any and all of its publications or on the world wide web, whether now known or hereafter existing, controlled by RSVP of Davis County in perpetuity. I will make no monetary or other claims against RSVP of Davis County for the use of these photograph(s)/video(s).

I do not give permission to use my likeness in photograph(s)/video(s) to Davis County RSVP.

## **Certifications**

## By signing below, I acknowledge that I have read and understand the following statements:

- I hereby state that I am 55 years of age or older and offer my services as a volunteer for Davis County Retired & Senior Volunteer Program. I understand that I am not an employee of the RSVP Project, the sponsor, Davis county, the volunteer station, or the Federal Government and agree to serve without compensation.
- I understand that I may come into contact with confidential information in my capacity as an RSVP volunteer. I agree to protect this information to the best of my ability and not disclose it during or after my service as a volunteer has ended.
- I understand that if I use my personal automobile in my volunteer service, I will arrange to keep in
  effect automobile liability insurance equal to or greater than the minimum requirements of the state of
  Utah. I will also keep in effect a valid Utah Driver's License.
- I acknowledge that I have received a copy of the Davis County Volunteer Handbook and understand it. I understand that it is my responsibility to read through it and ask for clarification from RSVP staff if needed.

**RSVP Volunteer Signature** 

Date

**RSVP Staff Signature** 

Date

**Equal Employment Agency -** Davis County RSVP is an equal opportunity Agency. Enrollment is done without regard to race, color, religion, national origin, sex, age, or disability. RSVP provides reasonable accommodations to the known disabilities of individuals in compliance with the Americans with Disabilities Act. For accommodation information or if you need special accommodations to complete the application process, please contact Davis County RSVP.

Return completed form to : Davis County RSVP 42 S State Clearfield, UT 84015 For questions call: 801-525-5094 or 801-525-5014 <u>rsvp@co.davis.ut.us</u>