

Cornell University Volunteer Agreement

We are pleased that you have decided to volunteer your services to Cornell University and the Lab of Ornithology (hereinafter referred to as "Cornell").

Please affirm your acceptance of the terms of this agreement, stated below, with your signature. Also, please accept our sincere thanks for your valuable contribution to Cornell University.

- 1) I agree that as a university volunteer my participation in the activities outlined in the attached Cornell University Description of Volunteer Duties is without valuable consideration. That document shall be considered a part of this agreement.
- 2) I understand that the university shall have the right to release me as a university volunteer without prior notice. I understand that I do not have a formal work appointment for those particular services.
- 3) I understand that as a university volunteer Cornell does not provide me with accident or medical insurance, and is therefore not responsible for any accident or medical expenses incurred by me. Further, I understand that I am neither covered by Workers' Compensation nor entitled to employee benefits as a result of my university volunteer affiliation.
- 4) Cornell agrees to provide me with third party liability insurance to protect me from any claims filed against me related to the duties described in the attached Cornell University Description of Volunteer Duties. In exchange, I, on behalf of myself, my heirs, and my representatives do hereby release, indemnify, and hold harmless Cornell or any of its officers, agents, or employees from any and all liability, damage, or claim of any nature that arises out of or related to my volunteer activities.
- 5) I am aware of the terms and conditions of this agreement and am signing this agreement of my own free will. Further, by signing this agreement I attest to the fact that I am eighteen years of age or older.
- 6) This agreement is valid from _____ to _____ (no greater than two (2) years).

University Volunteer's Signature _____ Date _____

Home Address _____ Phone _____

_____ email: _____

**Provide one copy of this agreement to the university volunteer.
Retain this agreement for three years from university volunteer separation.**