



**ORIENT LAND TRUST**  
Valley View Hot Springs  
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A Colorado 501(c)(3) Corporation

**Board of  
Directors**

**Congratulations, you have been accepted into our Volunteer  
Program!**

*Roger  
Courtemanche  
Chair*

**Agreement and Signature**

**I acknowledge and affirm that:**

*Jon Florey  
Vice Chair*

1) The information in my application is true, complete, and accurate. I understand that any false statements, omissions, or other misrepresentations made by me on my application may result in my immediate dismissal.

*Patrick  
Comiskey  
Treasurer*

2) I have read, signed, understood and agreed to follow all information given to me in OLT's Confidentiality Agreement, Policy on Drug and Alcohol Use, Waiver of Liability, Photo Release Form.

*Scott Hamilton  
Secretary*

3) As a volunteer of OLT, I am a representative of OLT and will conduct myself both while at and away from OLT according to the highest ethical and moral standards with the best interests of OLT in mind at all times.

*Sarah Halliday*

*Martin Jolley*

*Mike Allen*

4) I understand that volunteers shall not be impaired by either alcohol or drugs while on site and that marijuana or any legal/ illegal substance that impairs judgment may not be used, distributed or sold by volunteers at OLT.

*Susan Hicks*

*Bill Moench*

5) I understand that as a volunteer and not an employee of OLT, I am not covered by OLT's worker's compensation policy.

**Officers**

*Doug Bishop  
Executive  
Director*

6) I grant OLT permission to conduct a background check on me, if warranted, for positions involving substantial contact with OLT clients or access to confidential client information.

## **Confidentiality Agreement**

Every employee and volunteer has an ethical and legal responsibility to maintain the privacy of Orient Land Trust (OLT) visitors and contributors. All information obtained as an employee or volunteer is considered confidential, and may not be discussed outside the program. The purpose of this policy is to protect the visitor's/contributor's right to privacy and safety.

- I agree to keep in confidence information learned during the course of OLT's activities when the information concerns administration and/or activities of OLT not generally available to the public.
- I understand that the information of all visitors/contributors of OLT properties will be kept confidential.
- I agree to not keep any records of visitor services in my possession unless authorized by my supervisor. If I am authorized, I understand that it is my responsibility to keep it secure and confidential. Any records must be turned over to my supervisor immediately upon the termination of employment or volunteer service.
- I will not give any information regarding OLT's program or its visitors/contributors to the media.

## **Volunteer Notification and Waiver of Liability**

I, \_\_\_\_\_ (print volunteer name) as a volunteer of Orient Land Trust (OLT), do hereby and forever release and discharge OLT and respective board members, officers, employees, agents and volunteers from any and all claims, actions, expenses, liabilities, or damages of any nature whatsoever, including costs and attorneys' fees, arising out of any personal injury or any loss or damage to property in any way resulting from or otherwise relating to my participation as a volunteer for OLT.

- I fully understand and agree to provide my services to OLT as a volunteer in a volunteer capacity. OLT employees may volunteer to serve in a volunteer program so long as their activities do not directly relate to their OLT job.
- I fully understand that OLT will not provide or pay for medical treatment for injuries that occur within the scope and course of my volunteer activities. I fully understand that as a volunteer, I am not working for OLT as an employee therefore, I am not entitled to workers' compensation benefits, and OLT cannot provide lost wages

- or permanent disability benefits for my regular employment.
- I fully understand and agree that if I use my personal vehicle while conducting volunteer work for OLT, my personal automobile insurance is my responsibility and primary to any other insurance that may exist.
  - I fully understand and agree that if I use any of my personal property while conducting volunteer work for OLT, OLT will not provide insurance coverage or be financially responsible should damage or loss occur.
  - I fully understand that as a volunteer for OLT, I am covered by OLT's liability insurance to the same degree and conditions as an OLT employee but I am not covered by OLT's worker's compensation liability insurance.

By signing this form, the undersigned is aware of, understands the nature of OLT's volunteer program and the participation requirements and conditions, and agrees to the above.

#### **Photo/Video Release Form**

I hereby grant Orient Land Trust (OLT) permission to use the media described below, in

any and all publications, including web site entries, without payment or any other

consideration in perpetuity. I understand and agree that OLT has permission to use these

media, but I continue to hold copyright.

I hereby irrevocably authorize OLT to edit, alter, copy, exhibit, publish or distribute this

media for purposes of publicizing OLT's programs or for any other lawful purpose. In

addition, I waive the right to inspect or approve the finished product, including written or

electronic copy. Additionally, I waive any right to royalties or other compensation arising or

related to OLT's use of this media.

I hereby hold harmless and release and forever discharge OLT from all claims, demands,

and causes of action which I, my heirs, representatives, executors, administrators, or any

other persons acting on my behalf or on behalf of my estate have or may have by reason

of this authorization.

I am 18 years of age or older and am competent to contract in my own name. I have read

this release before signing below and I fully understand the contents, meaning, and impact

of this release. I agree to indemnify and hold OLT harmless for any and all losses, claims,

expenses, suits, costs, demands and damages or liabilities on account of personal injury,

death, or property damages of any nature whatsoever and by whomsoever made, arising

out of the media.

Signature/Date:

\_\_\_\_\_

Printed Name

\_\_\_\_\_

I hereby certify that I am the parent or guardian of

\_\_\_\_\_,

named above, and do hereby give consent without reservation to the foregoing on behalf of this person.

Parent/Guardian's

Signature/Date\_\_\_\_\_

Parent/Guardian's Printed

Name\_\_\_\_\_