STATE OF HAWAII
DEPARTMENT OF LAND AND NATURAL RESOURCES

AGREEMENT FOR INDIVIDUAL VOLUNTARY SERVICE

Name: _____ Phone: _____

Address: _____

DURATION OF AGREEMENT: START: _____ END: _____

I understand that I will not receive any compensation for the above work and the volunteers are NOT considered to be employees of the State of Hawaii for any purpose other than tort claims, and I understand that volunteer service is not creditable for leave accrual or any other employee benefits. I also understand that either the State of Hawaii or I may cancel this agreement at any time by notifying the other party. I acknowledge that there are inherent risks and dangers associated with this activity and in particular have noted those risks listed below.

I understand that I will be assisting the State of Hawaii, Department of land and Natural Resources in taking care of Hawaii's natural and cultural resources. I will be responsible for my equipment and supplies. I understand that a DLNR employee will be available to assist with logistics and communications. I will be responsible for all aspects for the actual work project, and the safe use of and proper care of hand tools including, but not limited to: machetes, saws, hand saws, hazel hoes, Pulaski's, McLeod's, pry bars, sledge hammers, bow-saws, power tools (including but not limited to: brush cutters), etc.

I am in good physical shape, and will be self-sufficient while at the work project site. I have informed the State of any physical, mental, and/or medical conditions that may increase the risk of harm to me or others while engaging in the activities described in this document. I understand that I should wear footwear when working in the field. I understand that the duration of the project may be less than eight hours in length; however, in the event of inclement weather the work day may be either shortened or extended at the discretion of the State. I further understand that work projects may occur in remote areas as well as on public or private lands where hunting activities occur and that I may not leave the trail work area without first notifying the State. I am aware that there are inherent risks and dangers associated with field work. They include but are not limited to:

Nightime work
Passenger in Utility-Terrain Vehicles (UTV)
Work around or near mechanical equipment
Passenger in helicopter, and or working around helicopter
Gusty wind
Sharp and or slippery rocks
Stinging or biting insects and spiders
Portable or no bathroom facilities
Steep drop-offs: Landslides
No potable (drinkable) water
Rugged terrain
Sharp tools
Lack of medicinal facilities
Wild animals
Harsh weather conditions ranging from hot and humid to wet and cold
Diseases caused by water, air, and animal vectors
Paint, fuel, and oil fumes
Thorny plants/dense vegetation
Poisonous plants
Slips, Trips, and Falls
Lack or reliable communication
No telephones
Weapons fire/gunshots
Wet and slippery roads
Work on/in near water
Herbicides/Pesticides/Fungicides
Work in a hunting area
Steep and slippery trail and river crossings
Flash floods

I agree to waive any and all claims against the State of Hawaii and its officers, agents, employees, or volunteers for any injury, property damage, and/or death caused by any negligence on the part of the State of Hawaii, its officers, agents, employees, and other volunteers and agree to hold harmless and indemnity of the State of Hawaii, its officers, agents, employees and other volunteers from any suits, actions, and claims arising out of or in any way connected with my activities as a volunteer or the activities of the State of Hawaii, it officers, agents, employees or other volunteers.

I understand I am also signing on behalf of any minor that is under my care during the duration of the volunteer activity. I further agree that I will be responsible eight for personally supervising the minor or for making arrangements for the supervision of the minor be another responsible adult.

I hear by volunteer my services as described above, to assist the State of Hawaii, Department of Land and Natural Resources in its authorized work.

_____

Signature of Volunteer (or Minor's guardian) - Date

Minor's Name: _____

Minor's Name: _____

Minor's Name: _____

Minor's Name: _____

Minor's Name: _____

Minor's Name: _____

Minor's Name: _____

Minor's Name: _____

Minor's Name: _____

Minor's Name: _____

Based upon the above agreement and understanding, the State of Hawaii agrees, while this arrangement is in effect, to accept your services as a volunteer.

Mahalo for your support of Hawaii's natural and cultural resources.

Suzanne D. Case, Chairperson
Department of Land and Natural Resources