

***SPITSKOP SPECIAL NEEDS SCHOOL (PTY) LTD***

***VOLUNTEER SERVICES AGREEMENT***

*This Agreement, made on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (date) by and between* ***Spitskop Special Needs School (also referred to in this agreement as SSNS),*** *and \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (full name and surname), \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (identity number), \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (date of birth),*

***Whereas***

*Volunteer intends to donate services to the SSNS identified above, and said SSNS intends to accept the donation of voluntary services.*

***Now therefore***

*In consideration of the mutual promises, the parties hereto agree as follows:*

1. *Volunteer agrees to donate services to SSNS in the capacity of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (description). Said services shall include, but may not be limited to, the following:*

*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

*(Attached sheet if necessary)*

1. *It is mutually and expressly understood that volunteer services shall be donated, and that said volunteer is not entitled to nor expects any present or future salary, wages, or other benefits for these voluntary services.*
2. *Volunteer agrees to follow the supervision and direction of any personnel, to whom the volunteer has been assigned to perform services.*
3. *Volunteer agrees that he/she will not be considered to be an employee to SSNS, its affiliates, or instrumentalities for any purposes other than claims in delict, while performing the above described voluntary services.*
4. *Volunteer further agrees that he/she will fully cooperate with the SSNS and its agents in any investigation, lawsuit, arbitration, or any other legal or quasi-legal proceeding that arises in respect of SSNS covered by this agreement. Volunteer further agrees to notify SSNS immediately of any incident that occurs or may occur within the knowledge of the volunteer, which gives or may give rise to liability on the part of the volunteer or SSNS.*
5. *I understand that my volunteer assignment will begin on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (date) and ends on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (date) and that I will spend approximately \_\_\_\_\_\_\_\_\_\_\_\_\_ hours per \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (period month, week or day), providing volunteer services. I also understand that my volunteer assignment may be terminated at any time by either party to this agreement in writing.*
6. *IN CASE OF EMERGENCY, please contact \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (name and surname) on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (telephone or cell number).*
7. *I agree to familiarise myself with and abide by SSNS’s rules, regulations and policies regarding conduct, confidentiality, safety and welfare. I understand that I may be subject to the same pre-employment screening and background checks as paid employees performing similar duties.*
8. *I understand SSNS provides limited accidental liability coverage to volunteers, but that no other employee, medical, retirement or insurance plans apply to this association. Volunteer further understands that if volunteer is responsible for injuries to third parties or damages to their property while acting outside the scope of the assigned volunteer duties that said volunteer may be held personally responsible for any monetary damages a court my award to the injured party.*
9. *Volunteer agrees that SSNS shall not be held liable for any injuries suffered by volunteer in the performance of his / her services notwithstanding SSNS’s negligence, gross negligence or any other liability whatsoever.*
10. *Any information received by the volunteer shall be treated as confidential and any copies or material belonging to SSNS in the possession of the volunteer, in both hard copy and soft copy, shall be surrendered upon termination of the services.*
11. *The volunteer understands that all equipment and services including internet access, telephones or other equipment, toys and the likes, are to be used for SSNS business purposes and the volunteer shall refrain from using same for any other purposes without prior written consent of SSNS’s directors.*
12. *The volunteer shall not incur any costs or expenses without the prior written consent of SSNS’s director and shall ensure that such cost and expense incurred shall be evidenced by original supporting documentation.*
13. *SSNS vehicles are not for the use by the volunteer unless prior agreement with Management.*

*Signature of Volunteer Date*

*Signature of SSNS Director Date*

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| ***TO BE COMPLETED AT THE END OF VOLUNTEER’S SERVICES*** | | | |
| *VOLUNTEER TIME DONATED* | | | |
| *YEARS:* | *WEEKS:* | *DAYS:* | *HOURS:* |
| *SIGNATURE OF VOLUNTEER:* | | *TERMINATION DATE:* | |
| *TYPED NAME OF SSNS:* | | | |
| *SIGNATURE OF SSNS:* | | *DATE SIGNED:* | |