

HVW VOLUNTEER SERVICE AGREEMENT CONDITIONS OF VOLUNTEER SERVICE

DATE OF CONDITIONS LISTED BELOW: March 24, 2007; Revised: October 15, 2022

THE FOLLOWING ARE SPECIFIC CONDITIONS TO BE ADHERED TO WHEN PERFORMING VOLUNTEER WORK FOR HVW.

NO VOLUNTEER SHALL BE REQUIRED TO PERFORM FUNCTIONS THAT WILL PLACE THEM ON ANY HVW BUILDING ROOF.

THERE SHALL BE AT LEAST TWO VOLUNTEERS INVOLVED IN THE PERFORMANCE OF ANY VOLUNTARY TASK. THIS MAY BE REFERRED TO AS THE "BUDDY SYSTEM" SO THAT NO INDIVIDUAL FINDS HIM SELF/HERSELF PERFORMING ANY TASK ALONE.

NO VOLUNTEER SHALL ENTER A UNIT TO PERFORM VOLUNTEER WORK WITHOUT THE WRITTEN CONSENT OF THE UNIT OWNER. A WRITTEN FORM MUST BE SIGNED BY THE UNIT OWNER TO ALLOW ANY "IN UNIT" TASKS. THIS ALSO APPLIES TO SIMPLE TASKS SUCH AS THE TESTING OF SMOKE DETECTORS.

NO VOLUNTEER SHALL PERFORM ANY TASKS THAT HE/SHE WOULD CONSIDER TO AGGRAVATE OR TO TAX A KNOWN MEDICAL CONDITION.

IF ANY VOLUNTEER IS ASKED TO PERFORM A FUNCTION THAT HE/SHE IS UNCOMFORTABLE IN PERFORMING, THE VOLUNTEER SHALL ASK FOR IMMEDIATE HELP OR IS TO REFUSE TO DO THE TASK.

IF A VOLUNTEER DECIDES TO CARRY OUT A TASK INVOLVING ELECTRICAL SYSTEMS OR PLUMBING SYSTEMS OR TO USE HVW POWER TOOLS OR TO USE POWER TOOLS OWNED BY OTHERS OR TO USE POWER TOOLS RENTED FROM OTHER SOURCES, THAT VOLUNTEER IS INDICATING THAT HE/SHE FEELS QUALIFIED TO WORK WITH SUCH SYSTEMS OR POWER EQUIPMENT BASED ON PREVIOUS EXPERIENCE AND KNOWLEDGE.

I HAVE READ AND UNDERSTAND THESE CONDITIONS. IF OTHER CONDITIONS ARISE THAT MAY IMPACT ON THE PERFORMANCE OF VOLUNTEER EFFORTS I AM INVOLVED WITH, I WILL BRING THESE TO THE ATTENTION OF THE HVW ASSOCIATION.

DATE: _____ SIGNATURE: _____

UNIT: _____ PRINT NAME: _____

HVW VOLUNTEER SERVICE AGREEMENT

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I am fully aware of and understand the conditions of my volunteer work for Heritage Village West Condominium Association, Bradenton, Florida.

I hereby knowingly, freely and voluntarily waive any right or cause of action, whatsoever, arising as a result of my voluntary duties from which any liability or injury may or could accrue to the Heritage Village West Condominium Association.

I understand and agree that my voluntary participation does NOT entitle me to any compensation or employee benefits. I further understand that I am NOT an agent or employee of Heritage Village West Condominium Association and that I will NOT represent myself as one.

I further understand that my voluntary participation is subject to termination at any time for any reason, and that I am entitled to no recourse in the event of such termination.

This WAIVER shall be determined to be a complete bar to any action which might otherwise be brought either by law or under State of Federal workers compensation act, employers liability act, labor law or any other statute for the recovery of compensation or damages for any and all personal injuries contemplated herein.

Signed this _____ day of _____, 20_____

SIGNATURE

PRINT NAME

HVW UNIT _____