

**ARROWHEAD UNION HIGH SCHOOL
VOLUNTEER CONTRACT**

I, (print name) _____, understand and agree that my involvement with the _____ at Arrowhead School District is performed with and under the following conditions:

1. I waive payment of any salary or stipend for my services.
2. I waive any eligibility for any benefits for my services.
3. I will familiarize myself with and adhere to all volunteer policies and procedures established by the School Board and Administration.
4. I will attend all inservice meetings designated to enhance student relationship skills as deemed necessary by the administration and/or activities director of the Arrowhead School District.
5. In the performance of my duties as a volunteer, I shall not intentionally or wantonly cause any injury or damage to person or property of said school district.
6. My services as a volunteer shall be performed with the understanding that I am included under standard insurance liability contract terms and conditions for the Arrowhead High School District. Under Wisconsin State Statute, I understand that I am not eligible for Worker's Compensation.

Signature of Volunteer

Date