



MEMORANDUM OF UNDERSTANDING
FOR PARTICIPATION IN
JAMES CITY COUNTY'S COMMUNITY EMERGENCY RESPONSE TEAM PROGRAM

This Memo of Understanding between the James City County CERT program and CERT volunteers is intended to explain the role of both parties with regard to liability, personal injury, and compliance with CERT standards and guidelines.

- 1) I herein request permission to participate in James City County's Community Emergency Response Team Program as a volunteer. I understand that training will be provided by the James City County Fire Department/Division of Emergency Management in order to help me better prepare for and function more effectively in emergencies.
- 2) I understand that participation in the CERT program may carry a risk of personal injury. I have been advised to consult with my physician before undertaking any stressful activities. I agree not to participate in any activities that knowingly exceed my physical or emotional capacity or go beyond my CERT training. I further understand that there are natural and man-made hazards, environmental conditions, diseases and other risks which alone or in combination with my actions may cause injury to me. My participation in the CERT program is voluntary and I hereby agree to assume any personal injury to me and/or damage to my property arising from my participation in the CERT program.
- 3) CERT volunteers, while acting under the auspices of James City County Emergency Services and within the scope of their training, are covered by the Code of Virginia and by James City County. This includes liability protection under the laws of the Commonwealth (§44-146.23 of the Code of Virginia specifically addresses the CERT volunteer's immunity from liability). A current copy of this law will be provided to you. While acting under the auspices of James City County Emergency Management and within the scope of their training, CERT volunteers are eligible for legal representation if sued. James City County provides supplemental accident medical coverage for CERT volunteers. In the event a CERT volunteer is injured while performing duties as a volunteer, accidental medical coverage is provided in excess to any other medical coverage the volunteer may have. The current limit of this excess medical coverage is \$25,000.
- 4) I agree to comply with the standards and guidelines of the James City County CERT Program as stipulated in the Standard Operating Guidelines which have been provided to me, and with any amendments to them. I understand failure to comply could result in immediate expulsion from the JCC CERT Program.
- 5) I hereby give permission for activity videos and photographs to be taken of me, and understand that they may be used in official James City County publicity, including but not limited to programming for the James City County government cable channel, posting to the James City County website, and in James City and local publications, displays and presentations.
- 6) I understand that by participating in the JCC CERT program I am a volunteer and not a County employee.

Print Name _____

Signature/Date _____

CERT Manager _____ Date _____

(Revised 6/11/09)