

**Basic Info for PVPS volunteers:**



Thank you for considering serving with Pecos Valley Public Services. Before you continue, we want to be clear about what volunteering with a Community EMS agency involves.

We are not a social club. We are a mission-driven medical services organization. Our work focuses on preventing medical situations from becoming emergencies, while remaining ready to support emergency response when needed.

We understand that your personal life comes first, but we do ask members to take their commitments seriously and communicate them with the people who depend on them - family, employer, and others. If questions arise, our officers are available to help explain our role and expectations.

Membership also means active participation. We ask volunteers to attend meetings, assist with agency projects and fundraising, and maintain required training and certifications. We provide classroom and hands-on training, but you should expect to invest personal time as well. Many certifications require periodic renewal, and staying current is part of serving safely and professionally.

Pecos Valley is a member-governed organization. Our members decide who joins the agency. All new applicants serve as probationary members during an initial evaluation period. This allows both the applicant and the organization to determine whether the fit is right. At the conclusion of this period, the membership votes on full acceptance.

We expect professional conduct at all times - especially when representing the organization. Members are responsible for using agency equipment, uniforms, and identification appropriately and taking good care of any items issued to them. You also acknowledge that photos or videos taken during agency activities may be used for training, outreach, recruitment, or public information.

In return, you will be part of a professional, supportive team, people you can rely on in the field and in everyday life. This work can be rewarding and meaningful, and it can also be challenging. You will see both.

Our bylaws, operating procedures, and related documents are available on our website and can be requested from an officer at any time. These policies explain how the organization functions and are binding for all members. Please read them carefully, and reach out if you have questions.

Take your time to consider whether this commitment is right for you. Thank you again for your interest in serving our community.

***I have read and I understand what is expected from me. I will strive to fulfill my role and duties as an Pecos Valley Public Services Volunteer to the best of my abilities. I acknowledge that I am serving as a volunteer and that any stipend provided is nominal and does not create an employment relationship.***

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature



**PECOS VALLEY PUBLIC SERVICES**  
Waiver & Release from Liability and Damages

I, the undersigned volunteer of the Pecos Valley Public Services, a New Mexico nonprofit charity (the "**Charity**"), hereby agree to release, waive, and indemnify, hold harmless, and forever discharge the Charity and it's staff, officers, directors, agents, employees, affiliates, successors and assigns (collectively, the "**Charity Parties**"), of and from any and all claims, demands, debts, contracts, expenses, causes of action, lawsuits, damages and liabilities, of every kind and nature, whether known or unknown, in law or equity, that I or my respective family members, representatives, heirs, assigns, next of kin, and executors (collectively, the "**Volunteer Parties**") ever had or may have, arising from or in any way related to my participation as a volunteer at or in any of the events or activities conducted by, on the premises of, or for the benefit of, the Charity Parties (the "**Waiver of Liability**"); provided, however, that my Waiver of Liability does not apply to any acts of gross negligence, or intentional, willful or wanton misconduct on the part of the Charity or the Charity Parties.

I understand that the activities and functions in which I participate may (but need not) be considered of a volunteer nature, or for the benefit of the Charity as a 501(c)(3) organization, and may be dangerous or may cause serious or grievous injuries, including bodily injury, damage to personal property and/or death. On behalf of myself and the Volunteer Parties, I waive all claims for damages, injuries and death sustained be me or to my property, that I may have against the Charity Parties (the "**Waiver of Damages**").

By the foregoing Waiver of Damages and Waiver of Liability, I assume all risk, and take full responsibility and waive any claims of personal injury, death or damage to personal property associated with the Charity and the Charity Parties, including but not limited to any volunteer missions, training, operations, activities, community events, at the Charities facilities or not, using the Charity equipment or not, practicing and/or engaging in organizational functions, philanthropic activities, other nonprofit or for profit engagements or functions and fundraisers or other related activities, whether on or off premises controlled by the Charity.

This Waiver & Release From Liability and Damages (this "**Agreement**") contains the entire agreement between the Charity and I, and supersedes any prior written or oral agreements between us concerning the subject matter hereof. The provisions of this Agreement may be waived, altered, amended or repealed, in whole or in part, only upon the prior written consent of both the Charity and I.

The provision of this Agreement will continue in full force and effect even after the termination of my volunteer activities for the Charity, whether by agreement, by operation of law, or otherwise.

I have read, understand and fully agree to the terms of this Agreement. I understand and confirm that by signing this Agreement I have given up considerable future legal rights. I have signed this Agreement freely, voluntarily, under no duress or threat of duress, without inducement, promise or guarantee being communicated to me. My signature is proof of my intention to execute a complete and unconditional waiver to the full extent of the law. I am 18 year of age or older and mentally competent to enter into this waiver.

VOLUNTEER

Signature

\_\_\_\_\_

Printed Name: \_\_\_\_\_ Date: \_\_\_\_\_

# Application For Membership



PECOS VALLEY PUBLIC SERVICES is a not-for-profit, 501(c)(3) licensed Community EMS agency. We are a non-governmental organization providing a variety of medical services as well as education and support services to the community. Our agency is a registered overdose prevention provider under NMSA 24-23-1 and NMAC 7.32.7.

We ask you to answer all questions truthfully and to the best of your abilities. We will keep all of your information confidential. Failure to answer any question truthfully may lead to the immediate terminating of your membership.

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Name Middle Initial Last name

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Date of Birth Place Of Birth (City, State, County)

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Current address

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Phone Email Address

Will you allow us to call, message, text or email you at any time (if necessary), even at night?  Yes  No

Have you ever been arrested, charged or convicted of a felony or DUI?  Yes  No  
Please explain

We may require a background check before processing your application \_\_\_\_\_  
SSN

Volunteers must have a valid drivers license \_\_\_\_\_  
Drivers License Number and issuing state

Are you a licensed medical provider? \_\_\_\_\_  
License ID and issuing state

Any medical condition that would require us to take special considerations when you are participating in company events or on missions?  Yes  No

Anything else you want to report that might be important?

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Signature Date