

THE HARAMBEE COMMUNITY DEVELOPMENT CORPORATION



**COMMUNITY SERVICE CONTRACT**

Community Service Component: **\$3 per hour**

Amount Paid: \$ \_\_\_\_\_

Number of Service Hours Needed: \_\_\_\_\_

Receipt # \_\_\_\_\_

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<b>Volunteer's Last Name</b>	<b>First Name</b>	<b>Middle Initial</b>	<b>Suffix</b>
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<b>Volunteer's Address</b>	<b>City/State</b>	<b>Zip</b>
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<b>Volunteer's DOB</b>	<b>Telephone No.</b>	<b>Email Address</b>
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<b>Drive Safe GA Location</b>	<b>Today's Date</b>
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I, the undersigned Volunteer will assume all liability for bodily or personal injury that I may receive arising from, and by reason of, any and all known and unknown, foreseen or unforeseen causes, or any other consequence that may result from participation in this program. I release and hold harmless each and every municipality, agency, office, institution or individual where community service hours are performed for any injury to my person or property.

The above named volunteer agrees to:

- Complete payment for the Community Service hours prior to starting. ([www.drivesafegeorgia.com](http://www.drivesafegeorgia.com))
- Maintain a log of community service hours including the date, time, location and total number of hours each day. Each Community Service event should be signed by a witness.
- Upon completion, volunteer must return the Community Service Contract & Log to the Drive Safe Georgia staff. Fax to: 770-741-0977. Our office will send a Community Service Letter of Completion to the student's email or identified officer of the court. Letters may also be picked up by appointment only during office hours.
- Remember that Probation Officers, Judges, Lawyers, etc., often call us to confirm completion of community service therefore your letter should not be shared with other individuals.

Volunteer's Signature: \_\_\_\_\_ Date \_\_\_\_\_

Signature (DSG Employee) \_\_\_\_\_ Date \_\_\_\_\_