

Volunteer Work Liability Waiver

EARTHDAY EVENTS IN BRENTWOOD CA

Date: 4/24/2010

I, the under-signed recognize that there are inherent dangers in doing volunteer work to benefit Friends of Marsh Creek Watershed. In signing this form I waive and release Friends of Marsh Creek Watershed from any liability in the event I am injured or otherwise harmed. I make this release for myself, any heirs, etc. and take full and complete responsibility for my actions and safety while participating in this activity.

I understand that volunteer work can be difficult under some conditions, including but not limited to hot or cold weather, steep and muddy terrain, poison oak, sharp tools, rain, etc., or if I'm not in good shape. I will notify the work party leader if I'm having difficulty, and will turn back or stop work early if necessary.

I understand that I can use my own tools but that in case of loss Friends of Marsh Creek Watershed is not responsible for replacement. If participant is under the age of 18, parent or guardian must sign this waiver.

Name (printed)

Signed (parent or guardian if
participant is less than 18 years old)

Email

Phone

Street Address

City

Zip

I would like to be on FOMCW's email list (check box below):

yes

no thank you

already receive it



- Application for:**
- 1-Day Project
 - Up to 20 Hours (Community Service)
 - Non-Supervisory

Medical Consent and Liability, Indemnity and Participation Agreement

4 Volunteer projects to choose from (check which one you will attend)

- Planting/Weeding: Marsh Creek trail at intersection of Creek Rd. and Concord Ave.
- Planting/Weeding: 2010 Azalea Way
- Planting/Weeding: Marsh Creek Staging area at Central Blvd west of North Estates Dr.
- Mulching: McClarren Park, 700 McClarren Rd.

Saturday, April 24, 2010: 8:00 a.m.-12:00 p.m.
Date/Time

- Check one:** Under 18 years old
 18 years old or older

Participant Name (print) _____

In consideration of my own and/or the above named individual(s) participation in the programs listed above, I voluntarily release the City of Brentwood, Brentwood Union School District, Liberty Union High School District, (collectively "City and Districts"), their officers, agents, employees and volunteers from any and all liability for injuries or death, or property damage resulting from or in any way connected with my and/or the individual(s) named above participation in the program. Additionally, as myself and/or as parent and/or guardian of the individual(s) named above, I do forever release and hold harmless and indemnify the City and Districts, their officers, agents, employees and volunteers from all claims or rights of action for damages which myself and/or the above named individual(s) has or may hereafter have, resulting in any way connected with myself and/or the individual(s) named above participating in this program, either before or after the individual named above reaches their age of majority. I understand that this waiver and release is applicable even though the negligent activities of the City and Districts, their officers, agents, employees or volunteers may have caused or contributed to the injury or death or property damage.

In consideration of my own and/or the above named individual(s) participation in the programs listed above do hereby agree to allow the individual(s) named above to participate in the aforementioned activity and authorize the program directors and/or instructors as agents for the above signed to consent to medical, surgical and dental examination, in addition to any and all other treatments that may be deemed necessary by medical personnel. It is further understood that this Agreement is binding on my heirs and assigns, as well as those of the individual(s) named above. I agree that pictures taken during program hours may be used for all future promotional purposes and hereby grant permission to the City to use my own or the above named individuals picture in the City's publications and the City's internet webpage. I further agree on behalf of myself and the above named individual to release and discharge the City, its officers, employees, agents, and volunteers from any and all claims or causes of action arising out of the photograph, name, image or likeness. In the absence of a signature below, payment of fees and participation in the program shall constitute acceptance of the conditions set forth in the release. I agree to return upon request equipment issued to the above participants in as good condition as when received except for normal wear and tear. The City and Districts will not provide health and/or accident insurance for program participants.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND IT AND SIGN IT FREELY AND VOLUNTARILY WITHOUT INDUCEMENT.

Signature: _____ Date: _____
(Parent/Legal Guardian must complete if participant is younger than 18 years)

Print Name: _____
(Parent/Legal Guardian must complete if participant is younger than 18 years)

Check all that apply: Participant Parent Legal Guardian

Complete this section if you are volunteering to receive Community Service Credit:	
Name of school/agency _____	
Teacher/agency contact _____	School/agency phone _____
# of Hours Required _____	When are your hours due? _____

