MT. PLEASANT PARKS AND RECREATION
VOLUNTEER CONTRACT

Name: _____ Local Phone:_____

Local Address: _____Apt. #_____

City_____Zip_____Email_____

In case of emergency, contact:

_____

Name Phone Relationship

Event or program being volunteered for: _____

Do you have your own transportation? _____

Additional Notes:

_____

_____

Day of the week you CANNOT practice: M T W R F

RELEASE OF LIABILITY

I AM AWARE that volunteering for Mt. Pleasant Parks & Recreation events involves risks of personal injury, property damage, and other risks associated with volunteer service.

I RELEASE Mt. Pleasant Parks and Recreation and this organization's agents and employees and organizers of Mt. Pleasant Parks & Recreation events, from liability for any loss, damage, and claims, including attorney fees, on account of injury to me or my property arising directly or indirectly from this event.

I HEREBY HOLD HARMLESS Mt. Pleasant Parks and Recreation and project organizers from any and all claims, actions, or damage relating to or arising out of any activity related to volunteering for Mt. Pleasant Parks & Recreation events.

These releases are effective for me, my personal representative, my assigns, and heirs.

I KNOW that if I become injured while participating in Mt. Pleasant Parks & Recreation events, I am responsible for my health care expenses, and I have made arrangements to handle such expenses through insurance coverage, access to cash, or other methods.

I ASSUME FULL RESPONSIBILITY FOR any and all claims and costs arising directly or indirectly out of activities, acts, or omissions while volunteering for Mt. Pleasant Parks & Recreation events.

I FURTHERMORE give the above stated organization involved with Mt. Pleasant Parks & Recreation events permission to photograph me. I understand that Mt. Pleasant Parks and Recreation has permission to use these photographs/videotapes for publicity purposes, unless written notice is received to the contrary.

I HAVE CAREFULLY READ AND UNDERSTAND COMPLETELY THE ABOVE PROVISIONS AND VOLUNTARILY SIGN THIS RELEASE AND INDEMNITY AGREEMENT.

_____

Volunteer Signature or Guardian Signature if under 18 Date