CITY OF HILLIARD est. 1853

Real People. Real Possibilities.

Recreation and Parks Department

Release, Waiver, Indemnification and Consent for Volunteer Activity with the City of Hilliard, Ohio

By signature hereof, I _____ (name of participant, or if under the age of 18, the participant's legal guardian) agree to assume all liability for, and agree to save, indemnify, defend, and hold harmless the City of Hilliard, Ohio, its elected officials, officers, employees, agents, subcontractors, and volunteers (hereinafter "City") from and against any and all claims or demands of any sort or nature for damage or injury to persons or property caused by me or caused by the acts or omissions of the City during my participation as a volunteer.

I further understand and agree, and I hereby consent and voluntarily agree specifically to (1) waive and release any and all claims of any sort or nature that I may have against the City, its elected officials, officers, employees, agents subcontractors and volunteers, for any personal injury, bodily injury or death, and for any property damage or loss suffered by me regardless of the cause thereof, and I (2) agree to hold harmless and indemnify the City from any and all claims or demands of any kind or nature which may be asserted by me, or on behalf of me by a third person, for any personal injury, bodily injury, death, or property damage or loss, regardless of the cause thereof.

I consent to the City of Hilliard, or its agent, photographing myself, and/or my minor child, participating in programs and volunteer activities and I consent to using those photographs for program and publicity purposes in various mediums, including print, electronic and website publications.

I agree and understand that as a volunteer, I am not, nor will I hold myself out to be, an employee of the City for any reason whatsoever.

By my/our signature(s) below, I affirm that I have read and fully understand the terms, conditions, releases, and waivers set forth above and agree to be bound by them.

_____ _____

Signature of Participant or Minor's Guardian Date

_____

Printed Name

_____

Emergency Contact Name and Telephone Number

If volunteer is a minor below the age of 18 years:

_____

Name of Minor, Address and Telephone Number

_____

Legal Guardian Address and Emergency Telephone Number

Hilliard Recreation and Parks Department

3800 Veterans Memorial Drive Hilliard, Ohio 43026 **Phone** 614.876.5200 **Fax** 614.876.5281 **Email** recandparks@hilliardohio.gov