

Town of Wilbraham

Volunteer Waiver, Release and Indemnification

Name of Volunteer (please print): _____

Address: _____ Phone: _____

Volunteer Activity: _____

Location of Volunteer Activity: _____

I, the undersigned volunteer, desire and agree to volunteer for the Town of Wilbraham (“Town”) in the volunteer activity described above. I further understand and agree as follows:

1. I am donating my time and services without any compensation and shall at no time be considered an employee or independent contractor of the Town, and the Town will not provide insurance coverage for me;
2. I know of no reason, medical or otherwise, that would prevent me from performing the tasks required to participate in this volunteer activity;
3. Assumption of Risk. I assume all risks of participating in this volunteer activity and assume full responsibility for my conduct and actions, including any injury to myself or others or damage to property that may result while volunteering, and I understand that the Town is not responsible for conditions that I create myself or those created by other volunteers or participants;
4. Waiver and Release. I, understand and acknowledge that this waiver discharges the Town from any liability or claim that I may have against the Town with respect to bodily injury, personal injury, illness, death or property damage that may result from my participation in the volunteer activity. I hereby agree to release, hold harmless and indemnify the Town, its officers, employees, agents and volunteers, from and against any and all loss, damage, expense or cost (including attorneys fees) of any kind for injuries (including property damage, personal injury, disability and death) arising out of this volunteer activity, whether caused by the negligence of the Town or otherwise.
5. I certify that I have health insurance covering me from illness, injury or accident.

I (and parent/legal guardian if volunteer is under age 18) have carefully read this release and understand and agree with all of its terms and conditions.

Signature of Volunteer

Date

Signature of Parent/Legal Guardian
(if volunteer is under age 18)

Printed Name of Parent/Legal Guardian

Date