

**CITY OF ARVADA
DIVISION OF RISK MANAGEMENT**

VISITOR/VOLUNTEER RELEASE AND WAIVER OF LIABILITY

**PLEASE READ CAREFULLY! THIS IS A LEGAL DOCUMENT THAT AFFECTS
YOUR LEGAL RIGHTS!**

This Release and Waiver of Liability (the "Release") is executed on this ____ day of _____, 20__, by _____, (the "Volunteer"), in favor of the City of Arvada, and its respective employees, volunteers, agents, and contractors (collectively, the "Released Parties").

I, the Volunteer, desire to work as a volunteer for one or more of the Released Parties and engage in the activities related to being a volunteer ("Activities"). I understand that my Activities may include, but are not limited to the following: job shadowing in a prospective occupational setting; traveling to and from worksites and other locations; and other volunteer related activities.

I, the Volunteer, release and forever discharge and hold harmless the Released Parties and their successors and assigns from any and all liability, claims and demands which I or my heirs, assigns, next of kin or legal representatives may have or which may hereinafter accrue with respect to any bodily injury, personal injury, illness, death or property damage which arises or may hereafter arise from or is in any way related to the Activities, whether caused wholly or in part by the simple negligence, fault or other misconduct, other than intentional or grossly negligent conduct, of any of the Released Parties or of other volunteers.

I, the Volunteer, understand and acknowledge that by this Release I knowingly assume the risk of injury, harm and loss associated with the Activities. I also understand that the Released Parties do not assume any responsibility for or obligation to provide financial assistance or other assistance, including but not limited to medical, health or disability insurance in the event of injury, illness, death or property damage.

If the Volunteer is less than 18 years of age, the Volunteer and the parent(s) having legal custody and/or the legal guardians of the Volunteer (the "Guardians") also hereby release and forever discharge the Released Parties from any claim whatsoever which arises or may hereafter arise from or is in any way related to the Activities, whether caused wholly or in part by the simple negligence, fault or other misconduct, other than intentional or grossly negligent conduct, of any of the Released Parties or of other volunteers.

I, the Volunteer, understand that, except as otherwise agreed to by the Released Parties in writing, the Released Parties are under no obligation to provide, carry or maintain health, medical, travel or disability or other insurance coverage for any

Volunteer. Each Volunteer is expected and encouraged to obtain his or her own health, medical, travel, disability or other insurance coverage.

I, the Volunteer, do hereby grant and convey unto the City of Arvada, all right, title and interest in any and all photographs and video and audio recordings of or including my image or voice, made by any of the Released Parties during the Activities, including but not limited to, the right to use such photographs or recordings for any purpose and to any royalties, proceeds or other benefits derived from them.

I, the Volunteer, expressly agree that this Release is intended to be as broad and inclusive as permitted by the laws of Colorado. I further agree that in the event any clause or provision of this Release shall be held to be invalid by any court of competent jurisdiction, the invalidity of such clause or provision shall not otherwise affect the remaining clauses or provisions of this Release, which shall continue to be enforceable. Further, a waiver of a right under this Release does not prevent the exercise of any other right.

By signing below, I, the Volunteer, and (if applicable) my Guardians represent that I/we have read the foregoing Release and Waiver of Liability and I/we understand and agree to all of its terms.

Volunteer: Name (please print): _____

Signature: _____

Address: _____

Phone: (H) _____ (C) _____ E-mail: _____

EMERGENCY CONTACT INFORMATION

Name: _____

Relationship: _____

Address: _____

Phone: _____

E-mail: _____

Date of Birth: _____ if under the age of 18.

IMPORTANT: If the Volunteer is less than 18 years of age, all parents or guardians must also sign this Release and Waiver of Liability with a witness. If only one parent or guardian executes this Release on behalf of a Volunteer who is under 18 years of age, then the undersigned parent or guardian of the Volunteer hereby covenants, warrants, represents and agrees that he or she is executing this Release on behalf of, and as an agent for, any other individual who may be a parent or guardian of the Volunteer, and that by executing this Release, the undersigned is binding himself/herself, the Volunteer, and any other parent or guardian of the Volunteer, and all of their heirs, executors, personal representatives, assigns and estates to this Release. Further, the undersigned guardian(s) hereby authorize and appoint the City of Arvada and its employees to travel with their minor child to work sites and volunteer activities and participate in volunteer activities on a voluntary basis without compensation.

Date: _____

Parent/Guardian: Name (please print): _____

Signature: _____

Address: _____