



## **Volunteer Activities 2016**

### **Volunteer Release and Acknowledgement of Risk**

**THANK YOU for Wanting to Volunteer for the Conewango Creek Watershed Association (CCWA)!**

**ALL VOLUNTEERS:** Please complete BOTH This Form AND the ACA Waiver Form and return to the CCWA Office. (Minor Volunteers will need to complete an ACA MINOR Waiver form)

**Name of Volunteer (please print):** \_\_\_\_\_

**Best Phone Number to Contact:** \_\_\_\_\_

**Alternate/Secondary Phone:** \_\_\_\_\_

**Name(s) of Event(s)** (**NOTE:** If you want to use this form for all of CCWA's 2016 Events and Activities, State "All CCWA Events and Activities for 2016" on the line below):

\_\_\_\_\_

**Date(s) of Volunteer Activity(ies)** (If for entire year, state "All of 2016"): \_\_\_\_\_

**Location(s)** (If for all year, state "All CCWA Events and Activities for 2016" on the line below):

\_\_\_\_\_

**Have You Volunteered Before?**  Yes, CCWA Volunteer.  Yes, Audubon Volunteer.  
 Yes, CWC.  Yes, Allegheny River Cleanup.  Yes, Other Organization.  
 No, New Volunteer.

This document must be signed by all volunteers in order to participate in this volunteer activity. If the volunteer is under the age of 18, this document must be signed by his or her parent or legal guardian.

**Volunteer Activity:** I am donating my time and services without any compensation and shall at no time be considered an employee or independent contractor of the Conewango Creek Watershed Association's (CCWA) Volunteer Activities. I understand that no organization is providing insurance coverage for me. I am also signing up as an **Earth Team Volunteer**, a volunteer program organized by USDA Natural Resources Conservation Service, for the purpose of tracking volunteer hours.

**Release from Liability:** In consideration for being allowed to participate in CCWA Volunteer Activities as a volunteer, I, binding my heirs, executors, administrators, and assigns, hereby fully and forever release, waive, discharge, acquit and exonerate the Conewango Creek Watershed Association and all organizers, sponsors, property owners, and all associated parties of CCWA Volunteer Activities in which I am participating, all National River Cleanup sponsors, including American Rivers, and all officers, agents, volunteers and affiliates, from any and all claims, actions, causes of action, remedies and complaints of any kind, except for claims for gross negligence or willful misconduct, which I have or may have, whether known or unknown, arising out of or relating to the CCWA Volunteer Activities or my volunteer work for this event, including specifically all claims for personal injury, paralysis, wrongful death, property damage and any other injury I may sustain.

**Assumption of Risk:** I assume all risks of participating in CCWA Volunteer Activities and full responsibility for my conduct and actions, including any injury to myself or others or damage to property that may result while volunteering. I understand that the Conewango Creek Watershed Association, National River Cleanup Sponsors, including American Rivers, and any other supporters and sponsors are not responsible for conditions I create for myself or those created by other volunteers or participants. I am aware that the CCWA Volunteer Activities may be hazardous, involving risk of serious bodily injury, death, or property damage. I am voluntarily participating in these activities with knowledge of the risks. These risks include, but are not limited to, slips, falls, exposure to hazardous materials, objects or persons falling on persons, equipment failure, injury from sharp equipment,

**Please Fill Out Both Sides of Form!**

improperly administered first aid, lightning strikes, hypothermia, and/or drowning. I know of no reason, medical or otherwise, that would prevent me from performing the tasks required to participate in this volunteer activity. I will be personally responsible for my own safety during these Activities and assume all risks and accept full and complete responsibility for any and all damages and personal injury of any kind, including death. I recognize Conewango Creek Watershed Association, supporters, sponsors, and National River Cleanup sponsors, including American Rivers, and their officers, agents, volunteers and affiliates make no representations whatsoever as to whether the Chautauqua Lake and/or other properties where volunteer activity may occur is safe or as to whether the safety recommendations provided are comprehensive or adequate.

**Photo Release:** I agree and understand that photographs and videos, which include my image, taken at the Volunteer Activity may be used by CCWA (a non-profit), for advertising, publicity, commercial or other business purposes. I hereby give CCWA permission to duplicate and distribute the photographs and videos or any parts thereof including my image in perpetuity. I waive the right to inspect or approve the finished version(s).

I further acknowledge that I was offered an opportunity to withdraw from participation as a volunteer in this event if I did not wish to sign this Release. However, I declined said withdraw opportunity and signed this Release voluntarily and without coercion.

**My signature below affirms that I have read and understand the above document and that I voluntarily, freely and without duress agree to its terms:**

\_\_\_\_\_  
**Participant Signature** **Participant Name (Please Print)**

**Date:** \_\_\_\_\_

**EMERGENCY CONTACT INFORMATION** – Please provide the complete contact information for someone who will not be at the volunteer activity(ies) with you:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone number: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Known Medical Conditions and Allergies: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Complete the following ONLY if volunteer is a MINOR (under the age of 18 on date of earliest Event):**

I, \_\_\_\_\_, hereby warrant that I am the parent or legal guardian of \_\_\_\_\_, [Minor Volunteer], and as such, I have full and complete authority to enter into and execute this Volunteer Release and Acknowledgement of Risk and thereby bind \_\_\_\_\_, [Minor Volunteer], his/her successors and assigns, to the terms set forth herein, and do so by signing below.

**MINOR Volunteer:**  
**Sign:** \_\_\_\_\_  
**Print:** \_\_\_\_\_  
**Date:** \_\_\_\_\_

**Parent/Legal Guardian:**  
**Sign:** \_\_\_\_\_  
**Print:** \_\_\_\_\_  
**Date:** \_\_\_\_\_

**Please Fill Out Both Sides of Form!**