

Activity:_	
Date/s:	

## Volunteer Waiver & Release of Liability, Assumption of Risk and Indemnity Agreement - Adult

Please print all information, sign where asked for signature.

Volunteer Applicant Name:	
Address:	Phone:
E-mail:	
	, (hereafter the "Undersigned") being an adult over the age
	Inteer activities (the "Activity) of the City of Scott Valley (the "City"). THE MES FULL RESPONSIBILITY FOR ANY RISK OF LOSS, PROPERTY
	LUDING DEATH, which otherwise may be sustained as a result of being
engaged in such Activity.	

- 1. In exchange for participating in the Activity, the Undersigned on behalf of his or her self, heirs, estate, insurers, representatives and assigns hereby fully releases, waives, discharges and covenants not to sue the City of Scotts Valley, its employees, elected and appointed officials, volunteers, attorneys, agents and any other person(s) acting on the City's behalf (hereafter the 'Releasees') from any and all claims for bodily injury (including death), and other liability, damages, lawsuits, expenses (including but not limited to, medical expenses and attorneys' fees) to the Undersigned or any other person, arising out of or relating to the Undersigned's participation in the Activity and agrees to waive any rights to make the above claims through a lawsuit or otherwise against the Releasees above.
- 2. The Undersigned understands and acknowledges responsibility for any injury or damage the Undersigned causes to others during the Activity and hereby agrees to indemnify, defend, and hold harmless the Releasees from any and all claims for bodily injury (including death), and other liability, damages, lawsuits, expenses (including but not limited to, medical expenses and attorneys' fees) caused by my negligence or willful misconduct, in the performance of the Activity.
- 3. <u>COVID-19</u>: By signing this waiver to volunteer with the City, the Undersigned acknowledges that you have read, understand, and will complywith all measures outlined by the State of California Governor's Office as outlined at www.COVID.CA.GOV, as well as any restrictions put in place by the Santa Cruz County Public Health Officer as they pertain to safety and preparedness for COVID-19. All volunteers are encouraged to stay home should they have a fever or other COVID-19 symptoms. Volunteers must comply with all state and local social distancing requirements, including the wearing of a mask, in effect at the time of the Activity. Individuals deemed high risk by the CDC or CA Department of Public Health, including those with underlying medical conditions are responsible for reading and understanding the following CDC guidance for groups of people with an increased risk for severe illness: https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/index.html.

By signing this agreement, I acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that I may be exposed to or infected by COVID-19 by participating in this program, and I hold the City harmless from any and all COVID-19 related liability or responsibility due to my participation in this program.

- 4. The Undersigned hereby grants to the City of Scotts Valley and their legal representatives and assigns, the irrevocable and unrestricted right to use and publish photographs of me, for advertising and any other promotional purposes and in any manner and medium; to alter the same without restriction; and to copyright the same. I hereby release the City of Scotts Valley and their legal representatives and assigns from all claims andliability relating to said photographs.
- 5. The Undersigned expressly agrees that the foregoing release and waiver and indemnity agreement are intended to be as broad and inclusive as permitted by California law.
- 6. The Undersigned understands and covenants that this Agreement shall apply to all unknown and unanticipated claims, injuries, causes of action and damages, as well as any known claims, and waives the provisions of Civil Code Section 1542, which reads as follows: "A general release does not extend to claims that the creditor or releasing party does not know or suspect to exist in his or her favor at the time of executing the release and that, if known by him or her, would have materially affected his or her settlement with the debtor or released party."

THIS AGREEMENT CAREFULLY; I FULLY TERMS. No oral representations, statements or in	, acknowledge and represent that I HAVE READ UNDERSTAND IT AND I VOLUNTARILY AGREE TO ITS inducement, apart from this written agreement have been made. If by a court, the remainder shall continue in full force and effect.	
Signed:	Date:	
I hereby certify I have never been arrested for or convicted of any felony or misdemeanor involving sexual or physical abuse of any adult or child, or any felony narcotics offense. If deemed necessary for the program for which I choose to volunteer, I authorize the City of Scotts Valley to obtain my criminal records and understand that the fact that I am applying to volunteer will be reported to law enforcement agencies. All statements and information submitted on this application are true and correct.		
Signed:	Date:	