CITY OF NEBRASKA CITY

1409 Central Avenue Nebraska City, NE 68410-2223 Phone: 402-873-5515 Fax: 402-873-5685



Volunteer's information:

Name: ______

Check here if Volunteer is under age 19 _____

Parent or Legal Guardian Name and Phone Number (required if Volunteer is under age 19):

Volunteer's Address:

Volunteer's Phone:

Emergency Contact

Name: _____

Relationship to Participant: _____

Phone Number: _____

VOLUNTEERS MUST COMPLETE THE WAIVER AND RELEASE FORM

PARENT SIGNATURE IS REQUIRED IF VOLUNTEER IS UNDER AGE 19

THIS FORM IS GOOD FOR 1) ALL VOLUNTEER ACTIVITIES OTHER THAN VOLUNTEER FIRE DEPARTMENT AND 2) UP TO ONE YEAR FROM THE DATE THE WAIVER AND RELEASE FORM IS SIGNED, AFTER WHICH A NEW VOLUNTEER FORM WITH WAIVER AND RELEASE FORM MUST BE COMPLETED BEFORE FURTHER VOLUNTEER WORK IS DONE.

VOLUNTEER WAIVER AND RELEASE FORM

RELEASE OF LIABILITY

In return for being allowed to participate in City of Nebraska City volunteer activities and all related activities, including any activities incidental to such participation ("Volunteer Activities"), the undersigned Volunteer (and Parent/Legal Guardian of Volunteer if Volunteer is under age 19) hereby **RELEASES**, **WAIVES**, **DISCHARGES**, and **HOLDS HARMLESS** the City of Nebraska City or its officers, directors, employees, sub-contractors, sponsors, agents and affiliates ("the City") from all present and future claims that may be made by me, my family, estate, heirs, or assigns for property damage, personal injury, or wrongful death arising as a result of my participation in the Volunteer Activities wherever, whenever, or however the same may occur and agrees not to sue the City therefore.

I understand and agree that the City is not responsible for any injury or property damage arising out of the Volunteer Activities, even if caused by ordinary negligence or otherwise.

I understand that participation in the Volunteer Activities involves certain risks, including, but not limited to, serious injury and death. I AM VOLUNTARILY PARTICIPATING IN THE VOLUNTEER ACTIVITIES WITH KNOWLEDGE OF THE DANGER INVOLVED AND I AGREE TO ACCEPT ALL RISKS OF PARTICIPATION.

I also AGREE TO INDEMNIFY AND HOLD HARMLESS the City for all claims arising out of my participation in the Volunteer Activities.

I understand that this document is intended to be as broad and inclusive as permitted by the laws of the State of Nebraska and agree that if any portion of this Agreement is invalid, the remainder will continue in full legal force and effect.

I represent that, to my knowledge, I am in good health and suffer no physical impairment that would or should prevent my participation in Volunteer Activities.

I UNDERSTAND THAT THIS DOCUMENT IS A CONTRACT WHICH GRANTS CERTAIN RIGHTS TO AND ELIMINATES THE LIABILITY OF THE CITY.

I am of legal age and am freely signing this agreement. I have read this form and understand that by signing this form, I am giving up legal rights and remedies.

Signature of Volunteer

Date

If Volunteer is Under 19:

I am the parent or legal guardian of the Volunteer. I am of legal age and am freely signing this agreement. I have read this form and understand that by signing this form, I am giving up legal rights and remedies.

Signature of Parent/Legal Guardian

PUBLICITY RELEASE

In return for being allowed to participate in City Volunteer Activities, as defined in the Release of Liability, the undersigned Volunteer hereby grants to the City, and each of its subsidiaries, affiliates, agents, advertising or promotional agencies, and partners, and all such entities' officers, directors, agents, employees, respective successors and assigns (collectively, "Authorized Parties"), the absolute and irrevocable right and permission to use, publish, broadcast and/or copyright the use of Volunteer's name, voice, photograph and/or likeness in any and all promotional or other materials based upon or derived from the Volunteer Activities in any manner, in any media whatsoever for any and all purposes, including by way of example but without limitation on the City's website and its social media accounts, in perpetuity, without additional compensation.

I understand that this document is intended to be as broad and inclusive as permitted by the laws of the State of Nebraska and agree that if any portion of this Agreement is invalid, the remainder will continue in full legal force and effect.

I am of legal age and am freely signing this agreement. I have read this form and understand that by signing this form, I am giving up legal rights and remedies.

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Signature of Parent/Legal Guardian

Date