

# VOLUNTEER WAIVER OF LIABILITY

Volunteer Event Location: \_\_\_\_\_

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

All participants in the volunteer event agree to hold the City of Harrisonburg harmless for any actions undertaken by the volunteers on park or other City/County owned land when participating in the event.

In consideration of the opportunity afforded to me to participate voluntarily in the City of Harrisonburg activities, and in recognition of the possible injury or liability to which I may voluntarily subject myself, I and my heirs, executors, administrators and successors and assigns hereby knowingly, freely and voluntarily waive any right or cause of action, whatsoever, arising as a result of such activities from which any liability or injury may or could accrue to the City or their agent or employees individually.

I understand and agree that my voluntary participation in City activities does not entitle me to any compensation or other employee benefits. I further understand that I am NOT an agent or employee of the City and will not so represent myself to any person, government unit or corporate entity. I further understand and agree that I will be solely responsible for my actions while participating in volunteer activities.

I further understand and agree that my voluntary participation in the aforementioned activities is subject to termination at any time by the City for any reason or no reason at all without notice, and that I am entitled to no recourse, nor will I seek any recourse in the event of such termination.

This waiver shall be determined to be and shall be a complete bar to any action which might otherwise be brought either by law or under any state or federal statute for the property injuries arising as a result of voluntary participation in the activities contemplated herein.



## Attachment 2: Parental or Guardian Release Waiver

I am the parent or guardian of \_\_\_\_\_, a minor, and on the minor's behalf and on my behalf, I accept the release and waiver of liability as inducement for allowing my child, or this minor, to participate in this volunteer event. I understand that the City of Harrisonburg has only given permission for this program and is not responsible for its direct administration and I waive any and all claims against the City of Harrisonburg for the planning or operation of the event. I further authorize any emergency medical care which may be necessary. I represent and warrant that I have the authority to give this release.

\_\_\_\_\_  
Parent or Guardian

Date\_\_\_\_\_

## PHOTO/MEDIA RELEASE WAIVER

We the undersigned hereby consent to the use of my/our photograph/video image/digital image in any website, brochure, publication, video produced by the City of Harrisonburg. I/We understand that this is on a voluntary basis and I/We will not be compensated for the use of my/our image. If you need more space, please use the back of this sheet.

Thank you to all volunteers and sponsors for participating in this volunteer event!

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