

Release, Waiver, Indemnification and Consent for Volunteer Activity with the City of Hilliard, Ohio

By signature hereof, I	agents, subcontractors, and volunteers sort or nature for damage or injury to
I further understand and agree, and I hereby consent and voluntarily agree any and all claims of any sort or nature that I may have against the City, its agents subcontractors and volunteers, for any personal injury, bodily injury damage or loss suffered by me regardless of the cause thereof, and I (2) agentee City from any and all claims or demands of any kind or nature which may me by a third person, for any personal injury, bodily injury, death, or property cause thereof.	elected officials, officers, employees, or death, and for any property ree to hold harmless and indemnify by be asserted by me, or on behalf of
I consent to the City of Hilliard, or its agent, photographing myself, and/or meaning programs and volunteer activities and I consent to using those photographs various mediums, including print, electronic and website publications.	
I agree and understand that as a volunteer, I am not, nor will I hold myself or reason whatsoever.	ut to be, an employee of the City for any
By my/our signature(s) below, I affirm that I have read and fully understand waivers set forth above and agree to be bound by them.	the terms, conditions, releases, and
Signature of Participant or Minor's Guardian	Date
Printed Name	
Emergency Contact Name and Telephone Number	
If volunteer is a minor below the age of 18 years:	
Name of Minor, Address and Telephone Number	

Legal Guardian Address and Emergency Telephone Number

Hilliard Recreation and Parks Department