



FRRPD Volunteer Application

Personal Information

Date: _____

Volunteer Date/Event _____

Last Name: _____ First Name: _____

Address (Include city & zip) _____

Cell Phone: _____ Home Phone: _____

Email Address: _____ Male: _____ Female: _____

Are you under 18 years old? Yes No

Why are you volunteering? (please circle)

School assignment Experience Would like to share interests with others Community Service

Certification of Volunteer

I agree as follows:

1. I am volunteering my services for the Feather River Recreation & Park District
2. I will perform assigned tasks that are within my physical capability, and I will not undertake tasks that are beyond my ability;
3. I will not participate if under the influence of alcohol or any drug that could impair my physical or mental abilities;
4. I am familiar with the safe operation and use of machinery, equipment and tools that I may utilize in connection with volunteering, and I will not undertake to use any machinery, equipment or tools with which I am unfamiliar or which I do not know how to operate safely;
5. I have received appropriate instruction regarding volunteering, including appropriate safety and emergency procedures, I fully understand those instructions, and I agree, after proper inspection, to use only the supplies, tools and equipment provided by FRRPD;
6. I will perform only those tasks assigned, observe all safety rules, and use care in the performance of my assignments;
7. I specifically acknowledge that I am engaging in this activity as a volunteer and not as a State of California employee, agent, official, officer or representative, and further acknowledge that I am not entitled to any compensation, benefit or insurance coverage from the **Feather River Recreation & Parks District**, State of California, the Department of Parks and Recreation, the California State Parks Foundation, or any Event promoter, sponsor, or organizer, nor will I make any such claim.

I understand and agree that the **Feather River Recreation & Park District**, nor any of their respective employees, officers, agents or assigns, (collectively referred to as "Released Parties"), may be held liable or responsible in any way for any injury, death or other damages to me or my family, heirs, or assigns that may occur as a result of my participation in the Event, or as a result of product liability or the negligence, whether passive or active, of any party, including Released Parties, in connection with volunteering.



No known physical or health limitation prevents me from safely participating in volunteering. In Consideration for being allowed to participate, I personally assume all risks, whether foreseen or unforeseen, in connection with volunteering of any harm, injury or damage that may befall me as a participant. If I am injured during the Event, I authorize any physician licensed in California to perform such emergency treatment as he or she believes, in his or her sole judgment, may be necessary. I am over the age of eighteen and legally competent to sign this liability release form or I have acquired the written consent of my parent or guardian. I understand that the terms herein are contractual and not a mere recital, this instrument is legally binding, and I have signed this document of my own free act.

I have carefully read the description of the program(s) for which I/we are registering and in consideration for being permitted by the Feather River Recreation & Park District to participate in the above activity, I hereby waive, release and discharge any and all claims for damages for personal injury, death, or property damage which I may have, or which may hereafter accrue to me, as a result of participation in said activity. This release is intended to discharge in advance the Feather River Recreation & Park District (its officers, employees, and agents) from any and all liability arising out of or connected in any way with my participation in said activity, even though that liability may arise out of negligence or carelessness on the part of the persons or entities mentioned above. It is understood that this activity involves an element of risk and danger of accidents and knowing those risks I hereby assume those risks. It is further agreed that this waiver, release and assumption of risk is to be binding on my heirs and assigns. I agree to indemnify and to hold the above persons or entities free and harmless from any loss, liability, damage, cost or expense which they may incur as the result of my death or any injury or property damage that I may sustain while participating in said activity.

Parental Consent: (to be completed and signed by parent/guardian if applicant is under 18 years of age). I hereby consent that my son/daughter may participate in the above activity. I hereby execute the above Agreement, Waiver, and Release on his/her behalf. I state that said minor is physically able to participate in said activity. I hereby agree to indemnify and hold the persons and entities mentioned harmless from any loss, liability, damage, cost or expense which they may incur as a result of the death or any injury or property damage that said minor may sustain while participating in said activity. **I HAVE CAREFULLY READ THIS AGREEMENT, WAIVER AND RELEASE AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT BETWEEN ME AND THE FEATHER RIVER RECREATION AND PARK DISTRICT AND I SIGN IT OF MY OWN FREE WILL.**

I agree to allow my image to be used in published materials and web sites that promote the programs of the Feather River Recreation & Parks District.

Adults: 18 years +

I hereby release and hold harmless the Released Parties from any claim or lawsuit for personal injury, property damage, or wrongful death, by me, my family, estate, heirs, or assigns, arising out of participation in the Event, including both claims arising during the activity and after I complete the activity, and including claims based on negligence of other participants or the Released Parties, whether passive or active.

I HAVE FULLY INFORMED MYSELF OF THE CONTENTS OF THIS LIABILITY RELEASE AND ASSUMPTION OF RISK.

Signature of volunteer: _____ Date: _____

Signature of parent: _____ Date: _____

(If volunteer is under 18)