

Bloomington Park District
VOLUNTEER WAIVER & RELEASE

IMPORTANT INFORMATION

The Bloomington Park District is committed to conducting its recreation programs and activities in a safe manner and holds the safety of volunteers in high regard. The Bloomington Park District continually strives to reduce such risks and asks that all volunteers follow safety rules and instructions that are designed to protect the volunteer's safety. However, volunteers must recognize that there is an inherent risk of injury when choosing to volunteer for any activity or program.

Please recognize that the Bloomington Park District carries only limited medical accident coverage for volunteers; therefore, it is strongly urged that all volunteers review their own health insurance policy for coverage. Additionally, each volunteer is solely responsible for determining if he/she is physically fit and/or properly skilled for any volunteer activity. It is always advisable, especially if the volunteer is pregnant, disabled in any way or recently suffered an illness, injury or impairment, to consult a physician before undertaking any physical activity.

WARNING OF RISK

Despite careful and proper preparation, instruction, medical advice, conditioning and equipment, there is still a risk of serious injury when providing volunteer services. Understandably, not all hazards and dangers can be foreseen. Volunteers must understand that depending upon the volunteer services, certain risks, dangers and injuries due to acts of God, inclement weather, slip and falls, inadequate or defective equipment, failure in supervision or instruction, premises defects, horseplay, carelessness, lack of skill or technique, and all other circumstances inherent to the particular volunteer services exist. In this regard, it must be recognized that it is impossible for the Bloomington Park District to guarantee absolute safety.

WAIVER AND RELEASE OF ALL CLAIMS AND ASSUMPTION OF RISK

Please read this form carefully and be aware that in consideration for providing volunteer services, you will be expressly assuming the risk and legal liability and waiving and releasing all claims for injuries, damages or loss which you may sustain as a result of participating in any and all activities connected with and associated with your volunteer services (including transportation services/vehicle operations, when provided).

As a volunteer, I recognize and acknowledge that there are certain risks of physical injury to volunteers in this program/activity, and I voluntarily agree to assume the full risk of any and all injuries, damages or loss, regardless of severity, that I may sustain as a result of my volunteer services. I further agree to waive and relinquish all claims I may have (or accrue to me) as a result of my volunteer services against the Bloomington Park District including its officers, officials, agents, volunteers and employees (hereinafter collectively referred as "Parties").

You may be volunteering in a park in which there is a pond, river, or stream. Please do not enter any body of water while volunteering for the Bloomington Park District. Your clean-up activities may include picking up litter along ponds or stream banks, but you are advised NOT to enter the water nor reach into the water.

Additionally, I hereby give consent for the Park District to use photos or video coverage of me and/or my minor child/ward in future publications and promotions and acknowledge that these photos/videos remain the property of the Park District.

I do hereby fully release and forever discharge the Parties from any and all claims for injuries, damages, or loss that I may have or which may accrue to me and arising out of, connected with, or in any way associated with my volunteer services.

I have read and fully understand the above important information, warning of risk, assumption of risk and waiver and release of all claims. If registering on-line or via fax, my on-line or facsimile signature shall substitute for and have the same legal effect as an original form signature.

Have you ever been convicted of being, or found to be, a child sex offender? No Yes

Volunteer Program _____

Volunteer's Printed Name _____

Parent/Guardian's Signature (if volunteer is under age 18) _____ date _____

Volunteer's Signature _____ date _____

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| PARTICIPATION WILL BE DENIED If the signature of the volunteer and date are not on this waiver. |
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VOLUNTEER
CRIMINAL BACKGROUND CHECK
WAIVER AND RELEASE OF ALL CLAIMS

Please read this form carefully and be aware that by agreeing to allow the Bloomington Park District to investigate your criminal background, you will be waiving and releasing all claims for damages you might sustain out of the criminal background check and review.

I understand that a successful criminal background check is a condition of my employment/volunteerism with the Bloomington Park District.

I agree to waive and relinquish all claims I may have against the Bloomington Park District and their officers, agents, servants and employees, as a result of participating in the criminal background check.

I do hereby fully release and discharge the Bloomington Park District, their respective officers, agents, servants and employees from any and all claims from damages which I may have or may occur to me on account of the results of any aspect of the criminal background check.

I have read and fully understand this Waiver and Release of All Claims.

Please read carefully and print clearly.

For accurate background checks we must have your full, legal name, i.e. Stephen, not Steve or Katherine, not Katie and no nicknames.

Sport or Position Volunteering for

First Name Middle Initial Last Name

Date of Birth (00/00/0000) Sex (M or F)

Address City State Zip Phone Number

Signature Parent/Guardian if 17 or younger Date

(Over)