Hood River County
Volunteer Waiver Form

Name of Volunteer (please print): _____

Address: _____ Phone: _____

Volunteer Activity: _____

Location of Volunteer Activity: _____

Dates of Volunteer Activity: _____

I, the undersigned, desire and agree to volunteer for the County of Hood River ("County") in the activity described above.

I further understand and agree as follows:

1. Compensation. I am donating my time and services without anticipation of financial remuneration and shall at no time be considered an employee or independent contractor of the County;

2. Safety and Fitness to Perform. I agree to perform all tasks in the safest manner possible. I will utilize necessary safety equipment, perform tasks by using the safest techniques, and use the proper equipment designed for each job. I will not participate in activities in which I have not been trained. I am physically fit and know of no reason that would prevent me from performing the tasks required to participate in this volunteer activity;

3. Release and Waiver. I, binding my heirs, executors, administrators and assigns, hereby release and forever discharge and hold harmless the County, its employees, agents and officers and its successors and assigns from any and all liability, claims, and demands of whatever kind or nature, either in law or in equity, which arise or may hereafter arise from my volunteer activities with the County. I understand that this Release discharges the County from any liability or claim that I may have against the County with respect to any bodily injury, personal injury, illness, death or property damage that may result from my activities with the County, whether caused by negligence of the County or its officers, directors, employees, partners, or agents or otherwise. I also understand that the County does not assume any responsibility for or obligation to provide financial assistance or other assistance, including but not limited to medical, health, or disability insurance in the event of injury or illness;

4. Medical Treatment. I hereby release and forever discharge the County from any claim whatsoever which arises or may hereafter arise on account of any first aid, treatment, or service rendered in connection with my volunteer activities with the County;

5. Assumption of Risk. I understand that the volunteer activities I am engaged in may include work that may be hazardous to me, including, but not limited to, hiking, lifting, construction, digging, earthmoving, trash removal and use of power tools. I am voluntarily participating in these activities with knowledge of the risks. I hereby expressly and specifically assume the risk of injury

or harm in the volunteer activities I am engaged in and I release the County from all liability for injury, illness, death, or property damage resulting from these volunteer activities;

6. Insurance. I understand that, except as otherwise agreed to by the County in writing, the County does not carry or maintain health, medical or disability insurance coverage for any volunteer;

7. Compliance with Policy. I agree to comply with all Hood River County policies relating to volunteers. I will keep a detailed log of my volunteer activities and will submit the log to the County upon request. I will complete an Equipment Check-Out Form when using any equipment owned by Hood River County.

8. Photographic Release. I hereby grant and convey unto the County all right, title and interest in any and all photographic images and video or audio recordings made by the County during my volunteer activities with the County, including, but not limited to, any royalties, proceeds, or other benefits derived from such photographs or recordings;

9. **Other**. I expressly agree that this Release is intended to be as broad and inclusive as permitted by the laws of the State of Oregon, and that this Release shall be governed by and interpreted in accordance with the laws of the State of Oregon. The parties agree to submit to the jurisdiction of the courts of the State of Oregon and to file any litigation concerning this Waiver in Hood River County Circuit Court. I agree that in the event that any clause or provision of this Release shall be held to be invalid by any court of competent jurisdiction, the invalidity of such clause or provision shall not otherwise affect the remaining provisions of this Release which shall continue to be enforceable; I (and parent/legal guardian if volunteer is under the age of 18) have carefully read this Release and understand and agree with all of its terms and conditions. I therefore have executed this Release as of the day and year written below.

Volunteer has carefully reviewed each of the sections above, and fully understand the agreements contained therein. Volunteer has had the opportunity to consider the agreements and ask questions.

Volunteer freely enters into this agreement and engages in the Activities upon these terms. Volunteer understands that by signing this agreement, Volunteer is releasing the County from any and all liability and legal responsibility for injury, damage, or death connected in any way with Volunteer's participation in the Activities, and Volunteer agrees not to initiate any legal action against the County for personal injury, damage, or death. Volunteer understands that this release is also binding on Volunteer's personal representatives, heirs, executors, administrators, successors, and assigns.

_____	_____
Signature of Volunteer	Date

_____	_____	_____
Signature of Parent/Legal Guardian (If volunteer is under age 18)	Printed Name of Parent/Legal Guardian	Date