



## Volunteer Agreement and Waiver of Liability

Capital Region Water (CRW) appreciates your contribution as a volunteer and event participant and hopes you find the experience productive and rewarding. CRW strives to provide a safe working environment for our volunteers and tour/event groups. There are occasions, however, where accidents occur, which is why we ask each participant, before they begin their experience, to sign this Volunteer Agreement and Waiver of Liability. Additionally, we wish for others to know of the volunteer and event opportunities offered by CRW. In order to publicize these opportunities, as part of this agreement we ask that you also agree to allow CRW to use your image, voice or likeness in any future publicity materials. Please review the below terms carefully and sign where indicated. If you are under the age of eighteen (18) it will be necessary for a parent or legally authorized guardian to review and sign this Agreement.

**Risks Associated with Volunteering and Event Participation.** I, the undersigned volunteer, acknowledge that I appreciate the risks associated with volunteering for and participating with CRW. These risks include personal injury, illness, death, and injury to personal property. Injury risks may be associated with, strictly by way of example, carelessness, lack of skill, horseplay, poor physical conditioning, inadequate instructions, slip and falls, less than ideal condition of the work site, proximity to roads and highways, workplace debris and other common risks associated with volunteering. Not only might these risks lead to damages to my body, but also to my personal property such as clothing, automobiles, electronics and mobile telephones.

I further acknowledge that I will be participating in a tour of an active drinking water facility. This tour will involve, among other evident hazards, proximity to active machinery, various types of water pools and wet or slippery surfaces all of which are inherent with the facility's operation.

**Assumption of the Risk.** Despite these risks, I agree to volunteer and assume all risk of injury. I do so of my own free will and agree to follow all instructions given by CRW staff and to work carefully and reasonably in line with my physical abilities and skill level. I further warrant that I am of the appropriate physical condition to perform the volunteer tasks asked of me and will inform CRW staff if I am unable or unwilling to perform a task requested of me. I understand that participation in this particular event involves standing and walking near a state highway and that there are certain risks involved with activities of this nature.

**Waiver and Release.** I, for myself and on behalf of my heirs, assigns, next of kin and legal representatives, release and waive all claims and any right of recovery for personal injuries, bodily injuries, property damage, illness or death I may have against CRW, its officers, officials, board members, employees and agents associated with my volunteer and event activities, regardless of whether the claim is caused in whole or in part by the simple negligence, fault or other misconduct (other than gross negligence or intentional conduct) of CRW.

**Medical Treatment.** In the event CRW administers first-aid or any treatment for an injury sustained during my work as a volunteer, I release and discharge CRW from any claim or action in connection with any medical treatment CRW administers.



# Volunteer Agreement and Waiver of Liability

**Loss or Destruction of Personal Property.** I further acknowledge that CRW does not assume any responsibility whatsoever for my personal property and that I have been advised against bringing valuable items of personal property to the work site. I will not hold CRW liable for any loss or damage to same.

**Insurance.** I understand that CRW does not assume and expressly disclaims responsibility for providing me with any sort of insurance, including health, medical and disability insurance.

**Photographic Release.** I grant to CRW the right to use my picture, voice, and other reproductions of my physical likeness in connection with advertising or publicizing CRW's services and activities, in all forms of media in perpetuity.

I have carefully read and reviewed this Volunteer Agreement and Waiver of Liability. I understand it fully and I execute it voluntarily.

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

\_\_\_\_\_  
Volunteer's Signature

\_\_\_\_\_  
Volunteer's Printed Name

\_\_\_\_\_  
Signature of Volunteer's Parent or Legally  
Authorized Guardian  
(if Volunteer is under 18 years of age)

Volunteer's Address: \_\_\_\_\_

Volunteer's Phone Number: \_\_\_\_\_

Volunteer's e-mail address: \_\_\_\_\_

Volunteer's Date of Birth: \_\_\_\_\_

Volunteer's Emergency Contact and Phone Number: \_\_\_\_\_