

Crosslake Community Center 14126 Daggett Pine Rd Crosslake, MN 56442

PLAYGOUND PROJECT VOLUNTEER WAIVER AND RELEASE

This form must be signed by volunteer who will participate in or otherwise be involved with the construction of the Playground Build (the "Playground Build" or the "Project"), or will be on the construction of the Playground Build. The construction site is the physical space where the playground is being installed into augered or man-made holes, and/or where human- or otherwise-powered concrete mixers or power tools are being operated; the construction projects are any activities directly related to the assembly, installation and placement of the playground equipment and safety surfacing. Any children under the state's minimum age for employment will not be supervised in any way or be allowed to participate in this construction project.

I _________ (print name) understand that I will be spending the day(s) as a volunteer for the Project and will be participating at my own risk. I acknowledge that my participation is voluntary and does not constitute a condition or requirement of employment. I further acknowledge that the Project will occur at a construction site and that the construction site will be a potentially dangerous place. I attest that I am physically fit and prepared for this event. I will not create an unsafe situation for other individuals, or myself nor will I use any tool or engage in any task with which I am not completely comfortable. I will abide by all applicable federal, state and local laws, as well as the rules and directions of the sponsors and coordinators. If I see any situation that I feel is unsafe, I will immediately call it to the attention a safety coordinator.

I understand that a volunteer may be at the Project to provide medical treatment in the event of an injury and to assist in arranging transportation to nearby medical facilities if necessary. On behalf of myself, as well as my heirs, executors, administrators and assigns, I hereby forever release, discharge, waive and agree to indemnify and hold harmless the City of Crosslake and organizers of the Project, along with their respective officers, directors, agents, employees, contractors, successors and assigns, and any volunteers to whom I give my consent to provide medical treatment to me or to any children or young adults under my supervision, from and against any and all claims, demands, actions, causes of action, obligations, liabilities, suits, losses, damages, costs, expenses, and fees, including, without limitation, court costs and attorneys' fees, of any and every nature of character, including, without limitation, for death, personal injury and/or loss of property, whether anticipated or unanticipated, directly or indirectly arising out of or connected in any way with my participation in the Project. Finally, I hereby grant the Project organizers full and complete permission to use in legitimate promotions of the Project photographs of me and quotations from me.

Volunteer Information	
Name (Print):	Phone Number:
Email:	
Signature:	_ Date: