

Iowa City Volunteer Worker Waiver of Liability

April 24 South District Neighborhood Energy Blitz

I understand that this is a Wavier of Liability. As a volunteer for the City of Iowa City, I am required to sign this document before volunteering with the City for the activity described herein. I realize that if I have any questions about this document, I should consult my attorney before I sign it.

I agree to volunteer my time and efforts to assist in removal of invasive species, plant debris and garbage at the above location during the above-stated time period. I understand that this volunteer activity will involve trimming, and loading plant debris, and may include the use of clippers and rakes. I further understand that the activity will be performed outdoors and that I should wear proper attire, including gloves, hat, closed-toe shoes, (flip flops or sandals are not permitted) long pants, sunscreen, bug spray, etc. to protect myself from injury in performing this activity. I understand that the City is not providing transportation to and from the site. I further understand that, due to safety concerns related to COVID-19, during this volunteer activity I must wear a mask (mask will not be provided by the City of Iowa City) and maintain social distancing of 6 feet.

I undertake this volunteer activity freely and voluntarily, will conduct myself at all times in a reasonable manner and remain personally responsible for my actions. I acknowledge there are inherent and other risks associated with the volunteer activity. Risk may include, without limitation, the possibility of personal injury or property damage or loss arising from activities. I understand and acknowledge the potentially dangerous environment I may be exposed to and freely assume all of the associated risks.

I, for myself and anyone entitled to act on my behalf, hereby waive, release and hold harmless (i) the City of Iowa City, its directors, officers, employees and agents, (ii) the owner of the property where I am providing my volunteer services and (iii) the organization providing the accommodations to me as a volunteer and the respective successors and assigns of each of the foregoing, from all claims of damage, loss or liability of any kind or nature arising out of my performance of the volunteer activity.

I understand and acknowledge that the City of Iowa and its directors, officers, employees and agents disclaim any and all liability to me for personal injury or property damage arising, directly or indirectly, from my activities as a volunteer. I grant permission to the City of Iowa City to use any photographs, videos or any other record of my activities for any purpose. I acknowledge that I am not an employee of City of Iowa City and am not entitled to any benefits of employment.

I do not have any physical or health problems that will affect my ability to undertake the activities. I acknowledge I am individually responsible to obtain all necessary vaccinations recommended by the applicable health department for undertaking these volunteer activities. If any part of this waiver is deemed unenforceable, all other parts shall be given full force and effect.

In signing this Waiver, I acknowledge and represent that I have read the foregoing, understand it, and sign it voluntarily as my own free act and deed; no oral representations, statements or inducements, apart from the foregoing written agreement, have been made and I am fully competent to execute this document.

Signature of Volunteer or Guardian

Date: _____

Print Name of Volunteer and Print Name of Guardian

Address, Telephone Number