



## Volunteer Liability Waiver Agreement

All Sacramento Weed Warriors volunteers, regardless of age, must complete and sign this Liability Waiver and Emergency Contact Information form prior to starting work. If you are under the age of 18 years of age, a parent or legal guardian must sign this waiver also.

**Description of Work.** Sacramento Weed Warriors projects involve working with sharp and sometimes heavy tools and working in outdoor working conditions. It is possible that your involvement could result in personal injury or a medical problem such as exposure to poison oak. A Sacramento Weed Warriors Project Leader will provide you as a volunteer with appropriate training to alert you to these possible dangers and work conditions and will demonstrate how to use weed removal equipment (such as loppers, shears, and weed wrenches) in a safe manner. You will be provided with gloves to protect your hands against minor cuts and bruises.

**Volunteer Agreements.** In signing this Liability Waiver, I agree that I am willingly volunteering to participate in a Sacramento Weed Warrior project. I agree to use work tools safely according to instructions I receive. I agree to behave in a responsible manner. I agree to only perform work that I am comfortable doing and that I feel I can accomplish safely. I agree I am wearing clothes and shoes that I believe will provide protection according to the work conditions.

**Release.** I hereby release all sponsoring organizations, and Sacramento Weed Warriors leaders, from any and all claims that may arise from or result in any expenses, personal injury, loss or damage incurred to me or by me during my participation in Sacramento Weed Warriors' projects.

**Permission-Use of Photographs.** I also grant permission for Sacramento Weed Warriors, and sponsoring organizations, to use SWW work group photographs, film, and videos of me (or my minor child) for promotional or other uses either associated with the project or sponsoring organizations, including use on an organizational web site(s).

### Participant and Parent Information

Participant's Name (please print): \_\_\_\_\_

Participant's Signature of Agreement: \_\_\_\_\_ Date: \_\_\_\_\_

Are you under the age of 18?  Yes  No

If yes, Parent/Legal Guardian's Name (please print): \_\_\_\_\_

Parent/Legal Guardian's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### Emergency Contact Information

In case of an emergency, please contact:

Name (please print): \_\_\_\_\_

Telephone Number(s): \_\_\_\_\_

Relationship: \_\_\_\_\_