



## Bluff Lake Nature Center

Volunteer sign-in and waiver. To be filled out by all volunteers.  
PLEASE SUBMIT THIS FORM TO THE BLUFF LAKE COORDINATOR ON PROJECT DAY

**\* PLEASE PRINT LEGIBLY \***

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY/STATE: \_\_\_\_\_

ZIP CODE: \_\_\_\_\_ E-MAIL ADDRESS: \_\_\_\_\_

PHONE: (H) \_\_\_\_\_ (W) \_\_\_\_\_ (C) \_\_\_\_\_

Are you registered as part of a group? If yes, what is the name of your group? \_\_\_\_\_

\_\_\_\_\_

Are you under the age of 18? If so, what is your year of birth? \_\_\_\_\_

### WAIVER AND RELEASE AGREEMENT

THIS IS A RELEASE OF LIABILITY. PLEASE READ CAREFULLY BEFORE SIGNING.

In return for receiving permission from Bluff Lake Nature Center, for allowing me to participate as a volunteer on the project of \_\_\_\_\_, I agree to assume all risks of loss and injury that may arise out of my participation and I agree to waive any and all claims against Bluff Lake Nature Center and the other parties involved.

I hereby release, and agree to indemnify and hold harmless Bluff Lake Nature Center and anyone else involved with this project and their respective agents, representatives, officers, employees, successors, assigns and insurers, hereinafter referred to collectively as "the Released Parties", from any and all liability, claims, demands or actions or causes of action whatsoever, arising out of damage, loss or injury to my person or property, whether anticipated or unanticipated, while participating in any of the activities contemplated by this agreement, whether such damage, loss, or injury results from the negligence of the Released Parties, their respective agents, officers, employees, successors, assigns and insurers or from some other cause. This release and agreement shall be binding upon me, my heirs, successors, assigns, administrators and executors.

I expressly acknowledge, represent and agree that expressly identifying and explicitly naming the respective agents, representatives, officers, employees, successors, assigns and insurers of the parties released, all of whom I intend to be released by this document, is a practical impossibility for the parties. I expressly acknowledge that, for good and valuable consideration, the terms "respective agents, representatives, officers, employees, successors, assigns, and insurers", however used in this Waiver and Release Agreement, are expressly and explicitly intended to include all and each and every individual, person, firm, entity and corporation who are now, or at any time may have been included in the specifically listed categories.

I realize that working on this project may involve risks and hazards, which may include, but are not limited to (1) the use of tools and other construction related equipment, (2) working around other participants who may not be accustomed to this type of labor or the tools and equipment associated with it, (3) working in terrain that may be uneven, rocky and otherwise hazardous, (4) other risks and hazards that may be described in the project orientation. I am aware of these and other risks and hazards inherent in participating in this project and hereby assume sole responsibility for all such risks and hazards.

I grant Bluff Lake Nature Center and other project sponsors and partners permission to utilize my image in photographic recordings of the project, and I waive any right to claim compensation in exchange for participating in the project.

I agree to abide by the rules and regulations of Bluff Lake Nature Center and its partners while participating in this project. I hereby acknowledge that I have read, understood, and voluntarily agreed to the foregoing waiver and release agreement.

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

Signature of parent or guardian if volunteer is under 18 years of age:

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

Person to contact in case of an emergency:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_