

ADOPT-A-STREET VOLUNTEER RELEASE AND HOLD HARMLESS

The City of Mukilteo Adopt-a-Street program is for volunteers who donate their time to help keep the City of Mukilteo clean. Participants are advised that working adjacent to a street can be hazardous. Participants shall exercise proper care in performing litter collection activities. Participants must wear the safety hat, vest and gloves furnished by the City of Mukilteo and must wear appropriate protective clothing such as long pants, a long sleeve shirt and thick-soled boots or shoes.

Participants may be entitled to receive coverage for medical treatment required for injury incurred during participation in the Adopt-a-Street program under the medical aid provisions of the Worker's Compensation Act, which is administered by the Department of Labor and Industries, but not for loss of time because of injury or illness, or for lasting disability or death.

As a volunteer for the City of Mukilteo I agree to follow all of the rules outlined in the Adopt-a-Street Program Guidelines. I acknowledge that City of Mukilteo personnel will provide direction and limited supervision regarding my duties as a volunteer. I will use all provided equipment appropriately and follow all safety practices.

I am aware that the work contemplated in the Adopt-a-Street program involves certain risks of physical injury and death. I will not use any powered tools unless I have first been trained in their proper and safe use. Being fully informed as to these risks and in consideration of being given the privilege to participate in the Adopt-a-Street program, I hereby, on behalf of myself and my heirs, assume all risks in connection with my participation in this program and I further hold harmless the City of Mukilteo, its officials, employees, volunteers and agents for any injury or damages which may occur to me while I am participating in this program and I waive any right to bring claim or lawsuit against them for any such injury, damage or death. Furthermore, I agree to hold harmless, defend and indemnify the City of Mukilteo, its officials, employees and agents from any and all claims and lawsuits for injury, loss, or damage to other persons or entities which may arise in the future as a result of or in connection with my participation in the Adopt-a-Street program except for injuries or damages caused by the sole negligence of the City of Mukilteo. I authorize any necessary emergency medical treatment that might be required for me in the event of physical injury and/or accident to me while participating in this program.

I hereby consent to allow my picture or likeness to appear in all advertisement and/or Member produced television coverage of without compensation to me. YES NO (Initial)	, , , ,
Printed Name of Participant:	Organization:
Signature of Participant:	Date:

If participant is older than 15 but less than 18 years old:

I certify that I am the parent or legal guardian of the below-named minor participant; that I have read and understood the foregoing release and waiver; and that I, in consideration of allowing the participant to participate in the City of Mukilteo Adopt-a-Street program, join in the release and waiver without reservation and agree to release and waive any claim or legal cause of action that I might have arising out of any personal injury, damage or death of the participant as against the City of Mukilteo, its officials, employees and agents. I further grant my full consent and authorization for the named minor participant to engage in the activity described above. Furthermore, I authorize all reasonable medical treatment that may be necessitated in the event of injury or accident occurring to the minor participant while working in the Adopt-a-Street program. I understand that minors under the age of 15 will not be allowed to participate.

I hereby consent to allow my child's picture or likeness to appear in any official document, Member website, sponsor advertisement and/or Member produced television coverage of City of Mukilteo sponsored recreational activity without compensation to me.



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YES [] NO [] (parent/legal guardian initials)	
Printed Name of Parent/Legal Guardian	Printed Name of Minor Participant
Signature of Legal Guardian	Date
Parent/l egal Guardian Email	Phone