



# VOLUNTEER RELEASE WAIVER AND INDEMNITY AGREEMENT

I, (please print) \_\_\_\_\_, am the aforementioned individual, and I do hereby desire to participate in the City of Carson's Volunteer Program. I certify that I am of good health and have no physical or other impediment, which would endanger my participation in such program.

In consideration of the City's acceptance of my application to participate in the Volunteer Program, I for myself, my heirs, executors, administrators, and assigns, hereby waive, release, and discharge the City of Carson and its officers, agents, and employees ("releasees") from any and all claims for damages for death, personal injury, or property damage which I may have, or which may hereafter accrue to me, as a result of my participation in this program. I further agree to indemnify and hold harmless the City of Carson and its officers, agents, and employees from any liability or claim or action for damages which in any way arises out of my participation in this program, even though that liability may arise out of negligence or carelessness on the part of any of the releasees.

I FURTHER UNDERSTAND THAT ACCIDENTS MAY OCCUR DURING MY PARTICIPATION IN THE VOLUNTEER PROGRAM AND THAT PARTICIPANTS IN SUCH PROGRAM MAY SUSTAIN SERIOUS PERSONAL INJURIES AND/OR PROPERTY DAMAGE AS A RESULT THEREOF. KNOWING THESE RISKS, I HEREBY AGREE TO ASSUME THOSE RISKS AND TO RELEASE AND HOLD HARMLESS THE CITY OF CARSON, ITS OFFICERS, AGENTS, AND EMPLOYEES FROM ANY LIABILITY TO ME OR MY HEIRS OR ASSIGNS FOR DAMAGES ARISING OUT OF OR RELATED TO MY PARTICIPATION IN SUCH ACTIVITY.

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*I have read and understand the above Volunteer Application, Release Wavier, and Indemnity Agreements.*

DATED THIS \_\_\_\_\_ DAY OF \_\_\_\_\_, 20\_\_.

SIGNED: \_\_\_\_\_  
VOLUNTEER SIGNATURE

FINGERPRINTS COMPLETED: \_\_\_\_\_  
DATE