



RELEASE

The undersigned desires to participate as a volunteer in a program operated by the City of Garden Grove.

In consideration of the City allowing my volunteer participation, I do hereby agree to hold the City, its officers, agents, and employees, free and clear of any liability for injuries or damages that may occur to my person or property while participating in the program.

It is my understanding that the City consents to having me participate in the program on public property. In the event entry is to be on private property, the City will first obtain the consent of the appropriate party to allow entry on private property.

It is my understanding that I am to provide my own transportation and supervision. In the event of any media coverage, it will be my personal responsibility to advise reporters whether or not I will agree to pictures or publication of my participation.

I understand that the volunteer work will require some physical effort (bending, lifting, walking, kneeling, etc.) and the use of small hand tools; supplies will be provided by the City. I am in good health and able to acknowledge these conditions. I understand I shall receive no compensation for participating in the program, and that work will be completed under the direction of City personnel. I will be provided with a specific location or locations where work is to be done. To protect myself, my co-workers, and the public, I will follow safety precautions to the best of my ability.

PROJECT DESCRIPTION: \_\_\_\_\_

LOCATION: \_\_\_\_\_

PROJECT DATE: \_\_\_\_\_

I am over 18 years old \_\_\_\_\_

I am under 18 years old \_\_\_\_\_

Date: \_\_\_\_\_ / \_\_\_\_\_  
(Participant's Name, Printed) (Signature of participant)

\_\_\_\_\_ / \_\_\_\_\_  
(Parent's Name, Printed) (If minor, signature of parent or guardian)

\_\_\_\_\_ (Address) \_\_\_\_\_ (City) \_\_\_\_\_ (Zip)

\_\_\_\_\_ (Daytime Telephone Number)

IN AN EMERGENCY CONTACT: \_\_\_\_\_ / \_\_\_\_\_  
(Name) (Relationship)

\_\_\_\_\_ (Telephone Number)