



VOLUNTEER APPLICATION and WAIVER FORM

VICTORVILLE COMMUNITY CLEANUP DAY OCTOBER 20, 2012 8:00 AM - NOON



**Please Fax or Deliver WAIVER form to City Hall by October 11
For an event T-shirt, form **MUST** to be received by October 4**

City of Victorville, 14343 Civic Drive, Victorville, CA 92395 760-955-5095 or Fax 760-269-0024

Please read the complete form before you sign. (Type or Print) **ONE FORM FOR EACH PERSON WHO IS VOLUNTEERING**

ORGANIZATION/BUSINESS/SCHOOL _____

Check the box if your school is participating in School Cents YES

I WANT TO BE A SITE LEADER (*must be over 18 years old*) and would be willing to communicate necessary information about the event with all team members assigned to my team. YES

VOLUNTEER's NAME _____

STREET ADDRESS _____ CITY _____

ZIP _____ PHONE _____ E-MAIL _____

SHIRT SIZE: (*Circle one*) Adult: XS S M L XL 2X 3X Youth: XS S M L

ADULT WAIVER FORM (fill out if you will be a volunteer yourself and you are over 18 years of age)

I, _____ (*print name*) agree to be a volunteer in the City of Victorville Community Cleanup Program and commit to the tasks assigned to me. I understand that it is my responsibility to adhere to and comply with the policies and procedures as indicated by the Coordinator. I agree to release and discharge the City of Victorville, its agents and employees, and all other persons associated with the Victorville Community Cleanup Day from liability for any injuries, accidents, or physical conditions that I may suffer during the event, claims, costs, and damages, including but not limited to those arising out of or related to my participation as a Community Cleanup Volunteer. I grant full permission for Victorville Community Cleanup Day to use my name, likeness, voice, photographs, videotapes, or quotations from me in accounts, promotions and activities, in any medium, related to any Victorville Community Cleanup Day events. I fully understand this agreement and I am aware that this is a release of liability and contract between the City of Victorville, the Victorville Community Cleanup Day and myself and I sign it of my own free will.

Adult Volunteer's Name (please print)

Volunteer's Signature

Date

MINOR WAIVER FORM (for volunteers under 18 years of age - both volunteer and parent/guardian must sign)

I, _____ (*print name of minor*) agree to be a volunteer in the City of Victorville Community Cleanup Program and commit to the tasks assigned to me. I understand that it is my responsibility to adhere to and comply with the policies and procedures as indicated by the Coordinator. I agree to release and discharge the City of Victorville, its agents and employees, and all other persons associated with the Victorville Community Cleanup Day from liability for any injuries, accidents, or physical conditions that the above dependent may suffer during the event, claims, costs, and damages, including but not limited to those arising out of or related to my participation as a Community Cleanup Volunteer. I grant full permission for Victorville Community Cleanup Day to use the above dependent's name, likeness, voice, photographs, videotapes, or quotations from me in accounts, promotions and activities, in any medium, related to any Victorville Community Cleanup Day events. I fully understand this agreement and I am aware that this is a release of liability and contract between the City of Victorville, the Victorville Community Cleanup Day and myself and I sign it of my own free will.

Name of Minor who is Volunteering (please print)

Volunteer's signature

Date

Minor's Parent/Guardian's Name (please print)

Parent/Guardian's Signature

Date

