



2020 Love Where You Live
Adult/Teen Volunteer Waiver of Liability



Project Activity: Circle one per choice

1 st Choice:	Litter Abatement	Curb Painting	Storm Drain Marking
2 nd Choice	Litter Abatement	Curb Painting	Storm Drain Marking
3 rd Choice	Litter Abatement	Curb Painting	Storm Drain Marking

**** Curb painting groups are pre-assigned. Please, only mark down Curb Painting if you are with a pre-assigned group.****

Name: _____ Date of Birth: _____

Address: _____ City: _____ Zip Code: _____

Home/Cell Phone: _____ E-mail: _____

Emergency Contact: _____ Number: _____

Organization: _____

EACH PERSON MUST READ BEFORE SIGNING

As a volunteer member of VIP I agree to:

1. Follow the City of Plano’s policies, rules and procedures.
2. Place safety and well-being first.
3. Represent the City of Plano in a professional manner that presents a positive image to the community.
4. Grant VIP permission to use my likeness, voice, photograph and words in any form for promotional activities without payment.
5. Grant the City of Plano all rights to release any photos taken of me or by me to the media as they see fit.

As a volunteer member I certify that:

1. I do not use illegal drugs.
2. I have never been convicted of a criminal offense.
3. I have never been charged with neglect abuse, or assault.

If you have been involved in any of the above activities, please provide a brief explanation and discuss the circumstances with the event supervisor.

YOUTH POLICIES:

- **No one under 18 years old is allowed to operate a power tool or climb ladders.**
- **All youth participants must have a parent/guardians signature with waiver.**
- **No one under 16 years old is allowed to use specified tools (varies per project).**

WAIVER OF LIABILITY

IN CONSIDERATION OF THE CITY OF PLANO ALLOWING [ME] [MY CHILD/CHILDREN] TO PARTICIPATE IN THE VIP PROGRAM, AND BEING AWARE OF THE POSSIBLE INJURIES THAT COULD OCCUR AS A RESULT OF THAT PARTICIPATION, I, [ON BEHALF OF MYSELF] AND/OR [MY MINOR CHILD/CHILDREN] RELEASE THE CITY OF PLANO OFFICIALS, EMPLOYEES, AGENT, INSTRUCTORS FROM ANY AND ALL INJURIES AND DAMAGES WHATSOEVER ARISING FROM PARTICIPATION IN THE EVENT.

I, MY HEIRS AND REPRESENTATIVE, AGREE TO INDEMNIFY, SAVE AND HOLD HARMLESS THE CITY OF PLANO, ITS OFFICIALS, EMPLOYEES, AND AGENTS FROM ANY AND ALL CLAIMS MADE BY ME (MY CHILD/CHILDREN) OR MY INSURER FOR INJURIES OR DAMAGES RELATED TO THIS EVENT.

I CERTIFY THAT ALL INFORMATION PROVIDED ON THIS APPLICATION AND DURING THE INTERVIEW PROCESS IS TRUE AND COMPLETE. I UNDERSTAND THAT FALSIFICATION OR SIGNIFICANT OMISSIONS OF ANY INFORMATION MAY BE CONSIDERED JUSTIFICATION FOR NON-ACCEPTANCE OR DISMISSAL IF DISCOVERED AT A LATER DATE AND THAT APPOINTMENT TO A VOLUNTEER POSITION MAY BE CONTINGENT UPON THE COMPLETION AND REVIEW OF A CRIMINAL BACKGROUND CHECK.

Signature of Volunteer Date

Signature of Parent or Guardian Date