

City of Fenton
VOLUNTEER REQUEST FOR PARK PROJECT

Volunteer Organizer Contact Information:

Name: _____ Phone No.: _____

Email Address: _____ Mailing Address: _____

Project Information:

Name of Project: _____ (“Project”)

Park Name and Location: _____

Date(s) of Project: _____ Estimated Start/End Times: _____

Description of Project: _____

Are materials or supplies being requested for the Project? (Circle one) YES* NO

Will services by Public Works be needed? (Circle one) YES* NO

*If yes, please provided a detailed list of materials or supplies or services being requested below.

NOTE: If supplies, materials, and/or Public Works services are being requested, this application must be submitted no less than five (5) business days prior to the start of the Project. If the requested materials and supplies for the overall Project exceeds \$500.00, the Project must be approved by the Parks and Recreation Committee and the Board of Aldermen which takes at least thirty (30) days.

Acknowledgements:

I acknowledge and agree that the Project and above requested park areas, dates, times, and supplies/materials or public works services, if applicable, will require prior, written approval by the City of Fenton Public Works Director ("Director"). Requested supplies, materials, and/or Public Works services are only provided based on availability and allocated funding, at the discretion of the Director and will only be used in conjunction with the approved Project. Furthermore, if deemed applicable by the Director, any reusable supplies (such as tools) must be returned to the City in good condition following completion of the Project. I further agree to be responsible and reimburse the City for the cost of any reusable supplies which are damaged due to misuse or negligence.

If approved, I also understand the scope of my relationship with the City is limited to a volunteer (not employee) and that no compensation, benefits, or insurance coverage of any kind from the City is expected in return for the services provided by me as a volunteer.

I also acknowledge, and agree to ensure, that the attached Waiver of Liability must be signed by all Project volunteers before participating in the Project. Copies of the signed Waivers must be submitted to the Director no less than two (2) business days following the start of the Project.

Organizer's Signature

Printed Name

Date

Signature of Parent or Guardian (**Required if signatory is under 18 years of age)

FOR CITY USE:

- Approved for participation on _____
- Denied. Reason: _____

Date: _____

Signature: _____
Director or his/her designee

Conditions of approval:

WAIVER OF LIABILITY (PARTICIPANT) – VOLUNTEER

I, _____ do willingly volunteer to participate in _____ at
(Insert Name) (Project or Event)
_____, on _____.
(Insert Park Name or Location) (Insert Date or Dates)

I acknowledge the scope of my relationship with the City is limited to a volunteer (not employee) and that no compensation, benefits, or insurance coverage of any kind from the City is expected in return for the services provided by me as a volunteer.

I hereby waive, release, and forever discharge the City of Fenton, its liability insurer, and any and all City employees and elected and appointed officials and all those who are or that may be liable on its or their behalf (together “Released Parties”) from any and all liability, claims, damages, losses, penalties, demands, costs and expenses, or causes of action of whatever kind, either in law or equity, which arise or may hereafter arise on account of my volunteer participation.

I hereby acknowledge that I understand the services I am voluntarily providing and the risks associated thereto and, I assume all risk and responsibility for any accident or injury which may befall me, if any, whether due to negligence or otherwise and whether caused by me or otherwise while so engaged, and I further agree to indemnify, defend, and save harmless the Released Parties from any claim, loss, damage, penalty, demand, cause of action, grievance, liability, cost and expense, judgment and decree, or any sum of money (including expert or attorneys’ fees) on account of, arising out of, resulting from, or in any matter pertaining to my volunteer participation. I further agree that this waiver and release shall be binding upon me, my heirs, executors, administrators, and assigns.

Participant's Signature

Printed Name

Date

Signature of Parent or Guardian (**Required if signatory is under 18 years of age)