

CITY OF TUSTIN
LIABILITY RELEASE AND ASSUMPTION OF RISK
(Volunteers)

In consideration of being permitted to participate in the 2015 Orange County Veteran's Stand Down ("Event"), the undersigned, on behalf of himself or herself, and his or her personal representatives, heirs, assigns, and next of kin, agrees to the following:

1. I am voluntarily participating in the Event as a volunteer on behalf of the Orange County Rescue Mission and Working Wardrobes, Inc., and do hereby personally assume all risk in connection with the Event for any harm, injury, or damage that may befall me as such a participant, including all risks connected therewith, whether foreseen or unforeseen.

2. I am not acting as a City of Tustin ("City") employee, agent or volunteer and shall not be entitled to any compensation or benefits from the City in exchange for my participation in the Event.

3. I understand and agree that neither the City of Tustin, the United States Department of the Navy, the Orange County Rescue Mission, Working Wardrobes, Inc., nor any of their affiliated and related agencies and companies, nor any participating business, nor the municipalities through which the Event may take place, nor their council members, directors, officers, agents, representatives, employees, predecessors, successors, or assigns (collectively "Released Parties") may be held liable or responsible in any way for any injury, death, or other damages to me or my family, heirs, or assigns that may occur as a result of my participation in the Event or as a result of the negligence of any party, including the Released Parties, whether passive or active.

4. I also understand that I may be photographed and consent that my likeness may appear in future promotional materials related to the Event without compensation.

I HAVE FULLY INFORMED MYSELF OF THE CONTENTS OF THIS LIABILITY RELEASE AND EXPRESS ASSUMPTION OF RISK BY READING IT BEFORE I SIGN IT ON BEHALF OF MYSELF AND MY HEIRS.

Participant's Signature

Date

Print Participant's Name

TO BE COMPLETED BY PARENT OR GUARDIAN IF THE PARTICIPANT IS A MINOR:

I certify that I am an adult and that I am the parent or legal guardian for the participant identified above. I HAVE FULLY INFORMED MYSELF OF THE CONTENTS OF THIS LIABILITY RELEASE AND EXPRESS ASSUMPTION OF RISK BY READING IT BEFORE I SIGN IT ON BEHALF OF THE PARTICIPANT, THE PARTICIPANT'S HEIRS AND MYSELF.

Parent/Guardian's Signature

Date

Print Parent/Guardian's Name