

SONOMA COUNTY COMMUNITY ROADSIDE CLEAN UP PROGRAM

Individual Participant

Release of Liability; Indemnification; Assumption of Risk

As a voluntary participant in the Community Clean Up Program (the "Program") offered by the Sonoma County Department of Transportation & Public Works, I hereby agree to the following conditions:

1. I waive, release and discharge the County of Sonoma, and its members, officers, agents, contractors and employees (the "Released Parties") from any and all liability for any loss, injury or damage to persons or property, including liability arising from any act of negligence or want of ordinary care on the part of Released Parties, arising out of or relating to my participation in this Program.
2. I will defend, indemnify and hold harmless the Released Parties from all claims, demands and causes of action, including court costs and attorneys' fees, arising from any legal proceeding or lawsuit relating to my participation in the Program.
3. I acknowledge that participation in the program involves the risk of serious injury and/or death and/or property damage, and I expressly and voluntarily assume all risk of death, personal injury, property damage, and all other injuries that may be caused by and/or result from participation in the Program. These risks, include, but are not limited to, volunteer activity in and near the public right of way; busy roads, rough terrain, swiftly flowing water; water, land, and debris that are possibly contaminated; vegetated areas with thorns, poisonous plants, overhanging branches and other hazards; areas inhabited by snakes, stinging and biting insects, and other potentially harmful animals; and hazardous materials, noxious substances, and sharp objects.
4. I understand that my services are being offered on a voluntary basis without anticipation of any payment or reimbursement for expenses incurred.
5. I understand that this "Release of Liability; Indemnification; Assumption of Risk" is intended to be as broad and inclusive as is permitted by the law of the State of California and that if any portion hereof is held invalid, I agree that the balance shall continue in full legal force and effect.

I have read the previous paragraphs and I know, understand, and appreciate these and other risks that are inherent in participation in the Program, and I hereby assert that my participation is voluntary, that I knowingly assume all such risks, and that I agree to the terms stated above.

Participant Name: _____

Participant Signature: _____ Date: _____

Address: _____

Phone: _____ Email: _____

Parent/ Guardian Name (for participants under 18): _____

Parent/ Guardian
Signature: _____ Date: _____

Minor's Name: _____

Address: _____

Phone: _____ Email: _____