CITY OF MILLERSBURG, OREGON

WAIVER, RELEASE, AND HOLD HARMLESS AGREEMENT FOR THE FOLLOWING ACTIVITY: MILLERSBURG CELEBRATION OCCURRING SEPTEMBER 10, 2022

1. I will perform the following volunteer services at the Millersburg Celebration:
2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
4. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
5. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
6. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
7. I understand that my volunteer activities may expose me, other members of my performance group, and other volunteers to a variety of hazards. Dependent on the nature of the performance, the risk of injury attendant with the performance, whether foreseen or unforeseen, cannot be eliminated due to the nature of the performance.
8. I am trained for the type of services I will provide as a volunteer and agree to assume full responsibility for my own safety, and the safety of other members of my group. I agree to waive and discharge any and all claims and to hold harmless the City of Millersburg, OR, its officers, employees, volunteers, and agents from any claims for injury or damages, that may arise from, or in connection with my volunteer service described above.
9. I have read this Agreement in its entirety, and I freely and voluntarily assume all risks and responsibilities associated therewith, and notwithstanding such, I agree to perform pursuant to this agreement and be bound by its conditions. This Agreement is intended to be as broad and inclusive as is permitted by law. If any provision, or any part of any provision of this Agreement, is held to be invalid or legally unenforceable for any reason, the remainder of this Agreement shall not be affected thereby and shall remain valid and fully enforceable.
10. I have read and understood the contents and nature of this agreement.

Reviewed and agreed to:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of volunteer Date