

**RICHFIELD JOINT RECREATION DISTRICT
VOLUNTEER WAIVER AND RELEASE**

I, [REDACTED], in exchange for the opportunity to volunteer my time to the Richfield Joint Recreation District (RJRD), make the following promises, representations and agreements:

- A. I understand that my work as a volunteer for the RJRD may expose me to various risks of injury or illness. I acknowledge and voluntarily assume these risks, and agree not to hold the RJRD, its officials, employees or agents, or the Village of Richfield or Richfield Township or either of their officials, employees or agents (collectively, the “Released Parties”), liable for any injury or illness arising from my participation as a volunteer. I agree that none of the Released Parties has assumed any special relationship or duty to me in connection with my status as a volunteer.
- B. For myself and my heirs, executors, agents and assigns, I hereby knowingly and intentionally waive and release, discharge, indemnify and hold the Released Parties harmless from and against any claim, action, liability, suit and expense (including attorney fees) of any kind or nature that arises, directly or indirectly, out of or in connection with my participation as a volunteer for the RJRD, whether or not such damage, loss, injury, or death is or is not foreseeable, or results from the negligence, recklessness, or other culpability of the Released Parties. Further, I agree that neither I nor anyone acting on my behalf will make a claim against or otherwise bring or maintain an action of any kind against any Released Party as a result of any loss, injury, or death to me arising from my participation as a volunteer.
- C. I further understand and agree that photographs or videos may be taken of RJRD volunteers, including me, in connection with their volunteer work and I grant exclusive permission to RJRD to utilize such photographs or video, which may identify me by name, on any RJRD media including the RJRD or Richfield Heritage Preserve (RHP) websites, RJRD or RHP social media accounts, brochures, reports or otherwise, without compensation or approval, and understand that such photographs and videos may be shared, in the discretion of RJRD, with external media such as newspapers or television.

Check one: I give consent to this Section C; or I do not give consent to Section C.

- D. I understand that RJRD is a public entity subject to the public records laws of the State of Ohio and that as a result, my name may become public, in connection with my photograph or otherwise, if required by law or otherwise in the sole discretion of RJRD, and that this waiver is a public record.
- E. I understand that this waiver is intended to be as broad and inclusive as permitted by the laws of the State of Ohio, and agree that if any portion is held invalid, the remainder of the waiver and release will continue in full force and effect. In signing this agreement, I acknowledge and represent that I have read and understand it; that I sign it voluntarily and for full and adequate consideration, fully intending to be bound by the same; and that I am

at least eighteen (18) years of age and fully competent (applies to parent/guardian if Volunteer/Releasor is under 18).

Signature of Volunteer/Releasor DATE

Printed name of Volunteer/Releasor

Signature of Parent or Guardian Signature -- DATE
Required if Volunteer/Releasor is under 18 years of age)

Printed name of Parent or Guardian

Address: _____

E-mail Address: _____

Phone (incl. area code) _____

Emergency Contact: _____

Emergency Contact Phone (w/ area code) _____

Emergency Contact Relationship: _____