



VOLUNTEER WAIVER

I have agreed to work as a volunteer for **Celebrate Highwood** and do so of my own free will. As a volunteer I am not an employee or agent of **Celebrate Highwood**. I understand this role does not include compensation or payment of any kind. Furthermore, I acknowledge that **Celebrate Highwood** does not offer health insurance, workers' compensation insurance, or any such employee benefit to volunteers.

I fully recognize and accept that volunteering has risks and unforeseen dangers (such risks could be, but are not limited to: mental/emotional stress or physical injury). I have read the Job Description for the volunteer duties I am accepting and understand the minimum requirements. I understand that I have the right to review each activity prior to my participation and choose to participate of my own free will. I have read and understand **Celebrate Highwood's** mission statement and best practice procedures. I pledge to act and perform within those expectations.

I acknowledge that **Celebrate Highwood** does not guarantee safety. I voluntarily waive, release, and hold harmless **Celebrate Highwood** and the **City of Highwood**, its board, employees, agents, and other volunteers from all claims, accidents, injuries, or death that result from actions related to my volunteer activities. I understand that this document disqualifies me from recovering damages against **Celebrate Highwood** or the **City of Highwood** should I be injured in the course of my duties. I shall defend, hold harmless, and indemnify **Celebrate Highwood** and the **City of Highwood**, its board, employees, agents, and other volunteers from and against all claims, accusations, notices, judgments, rulings, liabilities, expenses, etc. that may exist as a result of my actions, inactions, errors, acts, or omissions.

I have read and fully understand the above waiver. I understand that by signing this document I am giving up certain rights and accepting certain duties.

Volunteer Printed Name: _____

Email Address: _____

Volunteer signature: _____ **Date:** _____

Parent/guardian signature: _____ **Date:** _____
If Under Age 18