

Release and Waiver of Liability

This Release and Waiver of Liability (the "Release") executed on this _____ day of _____, _____ in favor of Keep Blount Beautiful, a nonprofit corporation, and its directors, officers, board members, employees, agents, the City of Maryville, City of Alcoa, and Blount County along with other organizations and businesses associated with this event.

The Volunteer desires to work as a volunteer for Keep Blount Beautiful and engage in the activities related to being a volunteer (the "Activities"). The Volunteer understands that the Activities may include removing debris from roadsides, clearing a variety of weeds and trash from an uneven and unkempt site, and disposing of such materials in a proper manner. The Volunteer hereby freely, voluntarily and without duress executes this Release under the following terms:

1. **RELEASE AND WAIVER.** Volunteer does hereby release and forever discharge and hold harmless Keep Blount Beautiful and its successors and assigns from any and all liability, claims, and demands of whatever kind or nature, either in law or in equity, which arise or may hereafter arise from Volunteer's Activities through Keep Blount Beautiful. Volunteer understands that this Release discharges Keep Blount Beautiful from any liability or claim that the Volunteer may have against Keep Blount Beautiful with respect to bodily injury, illness, or death that may result from Volunteer's Activities with Keep Blount Beautiful. Volunteer also understands that Keep Blount Beautiful does not assume any responsibility for or obligation to provide financial assistance or other assistance, including, but not limited to, medical, health, or disability insurance or in the event of injury or illness.

2. **MEDICAL TREATMENT.** Volunteer does hereby release and forever discharge Keep Blount Beautiful from any claim whatsoever that arises or may hereafter arise on account of any first aid, treatment, or service rendered in connection with the Volunteer's Activities with Keep Blount Beautiful. I hereby consent to receive medical treatment which may be deemed advisable in the event of injury, accident, and/or illness during this activity or event.

3. **ASSUMPTION OF THE RISK.** The Volunteer understands that the Activities including work that may be hazardous to the Volunteer, including, but not limited to, lifting, climbing steep and/or uneven terrain, removing trash and limbs, and working in unsanitary conditions. Volunteer hereby expressly and specifically assumes the risk of injury or harm in the Activities and releases Keep Blount Beautiful from all liability for injury, illness, death or property damage resulting from the Activities.

4. **PHOTOGRAPHIC RELEASE.** Volunteer does hereby grant and convey unto Keep Blount Beautiful all right, title, and interest in any and all photographic images and video or audio recordings made by Keep Blount Beautiful during the Volunteer's Activities with Keep Blount Beautiful, including, but limited to, any royalties, proceeds, or other benefits derived from such photographs or recordings.

5. OTHER. Volunteer expressly agrees that this Release is intended to be as broad and inclusive as permitted by the laws of the State of Tennessee, and that this Release shall be governed by and interpreted in accordance with the laws of the State of Tennessee. Volunteer agrees that in the event that any clause or provision of this Release shall be held to be invalid by any court of competent jurisdiction, the invalidity of such clause or provision shall not otherwise affect the remaining provisions of this Release which shall continue to be enforceable.

I CERTIFY THAT I HAVE READ THIS DOCUMENT, AND I FULLY UNDERSTAND ITS CONTENT.

Date: (mm/dd/yyyy) _____

Organization Name (if any): _____

Volunteer Name: _____

Phone#: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Email _____

Best way to contact for future events: Phone Email Mail

Volunteer Signature: _____

Adult Signature (if volunteer is under 18 years old):

Volunteer Site: _____

Do you need service hour credit? Yes No

If yes, where do you want proof of hours sent?

Would you like to be on our email list? Yes No