



320 EAST MOSBY ROAD, HARRISONBURG, VA 22801 OFFICE (540) 434-5928 • FAX (540) 434-2695

Parental or Guardian Liability & Photo Release

Annual Blacks Run Clean Up Day & Arbor Day

As a volunteer, I understand that I need to be present for safety instruction prior to engaging in the cleanup. I will exercise care and safety while participating in any program events. If I am performing Adopt-A-Stream related activities, I understand and shall comply with the Adopt-A-Stream General Program Conditions and Safety Guidelines. I will seek further direction or explanation of anything not fully understood by me.

I understand that if I participate in the event activities, I WILL NOT ENTER THE STREAM WATER, and will collect only that trash which is found on the land next to the stream. I understand that if I do not adhere to this rule, I am in violation of the accepted safety guidelines set forth for this Blacks Run Clean-Up event.

As a Virginia Adopt-A-Stream/Adopt-A-Street, or other Clean Up Day activity volunteer I will at all times indemnify and save harmless the adopting organization, the City of Harrisonburg, the Commonwealth of Virginia, and all Commonwealth and City employees, agents and officers, from responsibility, damage, or liability arising from the exercise of the privileges granted under designated programs.

I further indemnify and save harmless all event organizers partners, sponsors, and contributors involved in any way with the Annual Blacks Run Clean Up Day from any responsibilities, damage, or liability arising from my participation in any and all activities associated with this event.

By voluntarily engaging in any cleanup activity, I personally assume all risks for any harm, injury, or damage during my participation.

Photo Release: I hereby authorize the City of Harrisonburg to use my likeness and name in materials to be used in public service announcements, public education initiatives and in the service of the public good. This authorization extends to all publications whether now known or hereafter existing, controlled by the City of Harrisonburg. I will make no monetary or other claim against the City of Harrisonburg for the use of my likeness and/or name in perpetuity.

I am the parent or guardian of	, a minor,
and on the minor's behalf and on my behalf, I accept the release and waiver of liability as inducement	nt for allowing my child,
or this minor, to participate in this volunteer event. I understand that the City of Harrisonburg has or	nly given permission for
this program and is not responsible for its direct administration and I waive any and all claim	•
Harrisonburg for the planning or operation of the event. I further authorize any emergency med	ical care which may be
necessary. I represent and warrant that I have the authority to give this release.	
Parent or Guardian	
Date	