

# Great Parks of Hamilton County Individual Consent to Participate Form



Each individual must complete and submit this form to Great Parks of Hamilton County prior to participating in a volunteer activity. Individuals failing to submit a completed Consent Form prior to the volunteer activity will not be permitted to participate.

Name of project West Rd / Timberlakes Dr Intersection Cleanup  
Location Miami White water Park Date \_\_\_\_\_

### Assumption of Risk:

Volunteers at Great Parks of Hamilton County agree to participate in activities that involve some level of risk of personal injury. Despite careful preparation and instruction, not all hazards can be foreseen. Each volunteer is solely responsible for determining if he/she is physically fit and/or properly skilled for any volunteer activity. It is understood that depending upon the volunteer service, the volunteer may assume certain risks to include, but not limited to, inclement weather, slips and falls, premises defects, carelessness, heavy lifting, animal care, equipment and tools, motor vehicles and all other circumstances inherent to the particular volunteer service. Volunteers always have the right to refuse a task they are uncomfortable with.

### Waiver and Release of All Claims:

To the fullest extent permitted by law, I agree to assume the reasonable risk of participation in the activities for which I agree to volunteer. In consideration of being permitted to participate in the volunteer activity, I agree to defend, pay in behalf of, and hold harmless, Great Parks of Hamilton County and its Board of Park Commissioners, against any and all claims, demands, suits, losses, including all costs connected therewith, for any damage which may be asserted, claimed or recovered against or from Great Parks of Hamilton County and its Board of Park Commissioners and its employees, by reason of personal injury and death; and property damage, including loss of use thereof, which arises out of the alleged negligence of Great Parks of Hamilton County and, or in any way connected or associated with this volunteer activity. I agree to follow the directions of Great Parks of Hamilton County staff and exercise reasonable care in all activities in which I participate.

### Consent and Release:

I have read the above, and agree to assume the reasonable risk of participating in volunteer activities.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Emergency contact name and relationship (please print)

\_\_\_\_\_  
Phone number

**Participants under the age of 18 must provide a parent or legal guardian signature below.**

\_\_\_\_\_  
Name of parent or legal guardian (please print)

\_\_\_\_\_  
Primary phone number

\_\_\_\_\_  
Signature of parent or legal guardian

\_\_\_\_\_  
Alternate phone number

If anyone believes he or she has been subject to discrimination on the basis of race, color, sex, age, national, religion, ancestry, physical or mental disability, he or she may file a complaint alleging discrimination with the Office of Equal Opportunity, U.S. Department of Interior, Washington, D.C. 20240.