

Richland Soil and Water Conservation District
Volunteer Release – Minor Consent Form

I agree to release, discharge, indemnify, and hold the Richland Soil and Water Conservation District and its Supervisors, Officers, employees, agents and servants, harmless for any and all injuries or damages to me or my personal property while performing my volunteer services on behalf of the Richland Soil and Water Conservation District.

I recognize that while performing my volunteer services, there always exist risks of injury including personal physical harm. On behalf of myself, my heirs, personal representatives and executors, I hereby release, discharge, indemnify and hold harmless the Richland Soil and Water Conservation District, Supervisors, Officers, its agents, servants and employees from any and all claims, causes of action or demands of any nature or cause connected with my Volunteer Services. This includes all costs, attorney's fees and court costs incurred by the Soil and Water Conservation District or its insurance carrier, in connection with my volunteer services based on damages or injuries which may be incurred or sustained by me in any way and also including but not limited to those caused by me by acting outside the scope of my assigned duties and obligations as a District Volunteer. Such damages or injuries might include, but are not limited to accidents, injuries and personal property damage.

I understand that I am not an employee of the Richland Soil and Water Conservation District and I am not entitled to the benefits afforded employees of the Richland Soil and Water Conservation District. My intent is to render my services to the Richland Soil and Water Conservation District voluntarily. I understand that I will not be compensated for these services and I do not expect to be compensated for services performed on behalf of the Richland Soil and Water Conservation District. I understand I am not covered by Ohio Workers Compensation or any District Insurance and that any claim or recovery for my personal injury or death shall be limited to my own personal insurance provider and without any right to indemnification or subordination.

I understand that public relations are an important part of volunteering with the Richland Soil and Water Conservation District program, I therefore agree on behalf of my heirs, personal representatives and executors and administrator, to allow the Richland Soil and Water Conservation District to use any photographs taken of me, any testimonial and/or quotes for use in public relations efforts. The Richland Soil and Water Conservation District will use reasonable efforts to notify me, but such notification is not a condition of the photograph's release and/or use of testimonial and/or quotes for public relations purposes.

Note: individuals under 18 years of age must have the permission of a parent or guardian

I am the parent and/or guardian of the minor named above and have the legal authority to execute consent and release. I approve the foregoing and waive any rights to the above.

Name of Minor: _____

Parental (Guardian) Signature: _____

Print Name: _____

Date: _____ Telephone: _____

Permanent City, State, Zip Code Address: _____

Email Address: _____