Administrative Services
823 E. Avenue Q-9, Suite B
Palmdale, CA 93550
661/267-5473
Fax 661/267-5410

Palmdale Engaged
TIME+PASSION+SKILLS

VOLUNTEER RELEASE OF LIABILITY — MINOR

Volunteer's Name:	Age:
Parent's Name (if under 18):	
Address:	
Emergency Contact Name:	Phone:
Email:	

I would like to receive notice of future service events and volunteer opportunities: ☐Yes ☐No

Volunteer wishes to take part in_____ ("Activity") _____ (Date).

I understand that this agreement is required for participation by my child as a volunteer for the City of Palmdale ("City"), and that participation is conditioned on the compliance of me and my child with this Agreement and the Policies and Procedures of the City of Palmdale. My signature on this document indicates the following:

Parent, on his/her behalf and on behalf of child, hereby agrees to Indemnify, defend and save harmless the City, and their elected and appointed officials, officers, employees, agents and volunteers, from any and all loss, liability, damage or cost they may incur due to any claims arising from volunteer's presence in, upon or about City premises or facilities or equipment or participation in Activity whether by City's or Parent's negligence or volunteer's negligence or otherwise.

Parent, on his/her behalf and on behalf of child, understands that child's participation as a volunteer can result in bodily injuries to child, including but not limited to contusions, cuts, scrapes, head and/or dental injuries, and broken and/or sprained limbs, or death. Parent hereby assumes full responsibility for and risk of bodily injury, death or property damage to Parent or child due to the negligence of City or otherwise, while child is in, upon or about City premises or facilities or equipment or participation in the Activity. Parent, on his/her behalf and on behalf of child, their heirs, executors, administrators, successors and assigns, fully releases and discharges City, and their elected and appointed officials, officers, employees, agents and volunteers for any loss or damage and any claim or demands therefore on account of any injury to the person or property or resulting in death of Parent or child, whether caused by negligence or otherwise while child is in, upon or about City premises or facilities or equipment or participation in Activity.

I acknowledge and agree that this release applies to all claims for injuries, damages or losses to my or my child's person and property, real or personal, whether those injuries, damages, or losses are known or unknown, forseen or unforeseen, or patent or latent, that I or my child may have against City in connection with Activity, and I hereby waive application of California Civil Code Section 1542 on behalf of myself and my child.

I certify that I have read the following provisions of California Civil Code Section 1542:
"A general release does not extend to claims which the creditor does not know or suspect to exist in his favor at the time of executing the release, which if known by him must have materially affected his settlement with the debtor."
And indicate that fact by placing my initials here: _____
initials

I understand and acknowledge that the significance and consequence of this waiver of California Civil Code Section 1542 is that even if my child and/or I should eventually suffer additional damages arising out of my child's participation as a volunteer for the City, my child and I will be unable to make any claim for those damages. Furthermore, I acknowledge that I intend these consequences even as to claims for damages that may exist as of the date of this release but which I do not know exist, and which, if known, would materially affect my decision to execute this release, regardless of whether her lack of knowledge is the result of ignorance, oversight, error, negligence, or any other cause.

In the event of a medical emergency involving my child, the City of Palmdale and its agents and employees, are authorized to immediately transport my child to Palmdale Regional Medical Center and initiate any necessary medical care, for which I hold the City harmless..

Print Name of Parent/Guardian	Signature of Parent / Guardian	Date