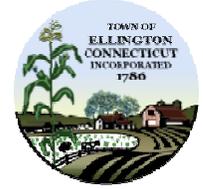




Town of Ellington

Hold Harmless Agreement Volunteers



The applicant volunteering for the Town of Ellington must submit this form to the Project Contact Person prior to the start of any volunteer work.

Applicant Information: (Please Print)

Name: _____

Address: _____
Street Town State Zip Code

Telephone: _____ Cell Phone: _____

Emergency Contact: _____

Emergency Contact Phone: _____ Cell Phone: _____

The following is to be completed if applicant is under age 18:

Age: _____ Parent's Name: _____

Parent's Address: _____

Parent's Telephone: _____ Cell Phone: _____

Hold Harmless Agreement

While performing volunteer work for the Town of Ellington, I, for myself, my heirs, successors, executors, administrators and assigns, do hereby RELEASE and HOLD HARMLESS the Town of Ellington, its officers, employees and agents from and against any and all losses, claims, costs, damages, suits, including reasonable attorney's fees, (not caused by Releasee's active negligence) resulting in personal injury to me or my property and from any claims of injuries or damages that I may cause to any person or property.

I do understand that if I am injured while performing assigned work I will report it immediately, but as I am not an employee of the Town of Ellington I have no right to claim a worker's compensation injury. Further, that I will be responsible for any medical bills should I become injured. I also know that if I am given a task and I am not familiar with a piece of equipment that I will ask for training in its use, or, that I can decline to use the piece of equipment, such as a power tool. By my use of the tool I state that I know how to use it safely and properly.

Agreement of Applicant:

 Printed Name Signature Date

Agreement of Parent or Guardian: *(if applicant under the age of 18)*

 Printed Name Signature Date

Original to First Selectman's Office Copy to Applicant