



Tracy Public Works Department
520 Tracy Blvd, Tracy, CA 95376 (209) 831-6300

March 28, 2026 Community Clean-Up Event

GROUP VOLUNTEER INFORMATION & LIABILITY WAIVER

1. I hereby acknowledge I am, or my minor child is, voluntarily participating in the City of Tracy Public Works Department volunteer program. I hereby acknowledge my, or my minor child, participating in these events does not come without the risk of injury or harm; I accept this risk, and assume responsibility for all liability and risk associated with my, or my minor child's, participation.
2. I hereby agree to waive and release the City of Tracy, its employees, agents, officers, volunteers, and joint powers authorities of which it is a member, from any and all claims, costs, liabilities, demands, rights, and causes of action that may arise from my, or my minor child's, volunteer work with the City of Tracy.
3. I further agree to indemnify and hold harmless the City of Tracy, its employees, agents, officers, volunteers, and joint powers authorities of which it is a member from and against any and all claims, suits, actions, liability judgment and expenses that may arise by reasons of services I, or my minor child, provide as a volunteer or that are connected in any way with those services.
4. I understand that I, or my minor child, will not be covered by any health or life insurance, or any other employee benefits of any kind offered by the City of Tracy other than workers' compensation for volunteers, and that I, or my minor child, will not be compensated in any way for my, or my minor child's, participation as a volunteer.
5. I grant permission for the City of Tracy to use my, or my minor child's, filmed or photographed image during volunteer activities to promote its services and programs, at the City of Tracy's sole discretion and without further consideration.
6. I expressly agree that the foregoing waiver, release of liability, and indemnity agreement is intended to be as broad and inclusive as is permitted by the law of the State of California and that if any portion is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

I have read and voluntarily sign this waiver, release of liability, and indemnity agreement, and further agree that no oral representations, statements, or inducement apart from the foregoing written agreement have been made.

	Participant's Name <i><u>(printed)</u></i>	Participant's Signatures	Parent/Guardian Name <i><u>(for anyone under 18 years of age)</u></i>	Parent/Guardian Signature	Date	Organization <i><u>(if applicable)</u></i>	Email Address <i><u>(contact only for future events)</u></i>
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
13							
14							
15							
16							
17							
18							