



## Volunteer Acknowledgement and Release

Date Signed:

With my (electronic) signature, I acknowledge the following statements:

- I promise to take due care during my volunteer activities and comply with City policies. I am aware of the hazards and risks that may be associated with my participation in volunteer activities with the City, including those associated with exposure to COVID-19.
- By this Acknowledgement and Release, I acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that I may be exposed to or infected by COVID-19 by volunteering for the City and that such exposure or infection may result in personal injury, illness, permanent disability, and death. I understand that the risk of becoming exposed to or infected by COVID-19 by volunteering for the City may result from the actions, omissions, or negligence of myself and others, including, but not limited to, City employees, officials, volunteers, program participants and their families. I voluntarily agree to assume all of the foregoing risks related to exposure to COVID-19, accept sole responsibility for any injury I may sustain (including, but not limited to, personal injury, disability, and death), illness, damage, loss, claim, liability, or expense, of any kind, that I may experience or incur in connection with my volunteer service. In exchange for my participation in the City's volunteer services program, I agree to release the City, and its employees, agents and officials, from any liabilities, claims, legal action, damages, costs or expenses that may arise from such injury, illness, loss, claim, liability or expense.
- The City has an obligation to defend and indemnify me if I am sued as a result of my conduct that arises from an act or omission occurring in the performance of and within the scope of my volunteer duties as required by the CIGA and City Code.
- If I am sued as a result of an act or omission that is outside the performance or scope of my volunteer duties or conduct that can be characterized as willful and wanton, the City is not obligated to defend or indemnify me.
- If I am injured during my volunteer duties, I am not covered by the City's worker's compensation coverage, but the City does have a relatively low amount of insurance coverage for certain volunteer medical expenses.
- If I use my own dog or tool to carry out my volunteer duties, the dog or tool must be inspected or assessed by an authorized City staff member to determine whether the dog or tool poses a threat of harm or danger. If a determination is made that the dog or tool poses a threat of harm or danger, I will not use the dog or tool to carry out my volunteer duties.

- I acknowledge and agree that my appointment as a City volunteer is contingent on completing any assigned training within the required timeframe.

Release: Only if my volunteer duties allow the opportunity to use my own tool or dog and in exchange for the opportunity to volunteer for the City of Fort Collins, I provide this release. If my dog is injured or tool damaged while performing volunteer duties, I agree to release the City from any claim or liability for such injury or damage.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Name (please print): \_\_\_\_\_