

City Park Improvement Association (“City Park”)

Volunteer Agreement

Including Assumption of Risks and Agreement of Release and Indemnification

This form must be read, understood, and signed by all Volunteers, adults and minors (persons under the age of 18) and by a parent or guardian (referred to as Parent) for a minor Volunteer. No volunteer may participate in any Volunteer activities unless waivers are signed.

Personal Contact Information:

Name

Address City Zip Phone Email Address

EmergencyContact/Relationship/Phone

Volunteer Event Day(s) _____

Volunteer Group (if applicable) _____

Description of Activities: Volunteer activities may include, but are not limited to litter cleanups (including cleanups along waterways and roads/streets), event/festival help, recycling support, natural disaster recovery efforts, and office work. I understand that there may be possible exposure to traffic, deep and swiftly moving water, animals and pests, invasive or toxic plants and weeds, debris, sharp objects, and other potentially dangerous items. I also understand that many volunteer activities may expose individuals to manual labor, standing for long periods of time, and exposure to the sun, wind, rain, and other environmental hazards. When needed, Volunteers must wear safety vests, gloves, and sturdy shoes.

Medical Concerns: In most cases volunteer activities can be adjusted to accommodate most all participants. Participants with underlying medical problems that put them at greater risk of injury or illness during an activity must carefully consider those risks before choosing to participate, and if they proceed, they do so at their own risk. City Park reserves the right to exclude any Volunteer from participation, for medical, safety, or other reasons. Participants may notify City Park Staff of a request for accessibility accommodations. Such requests will be considered and may be granted if reasonable and if the accommodation does not in any way compromise the safety of any participants or staff.

Inherent and Other Risks: Physical risks would typically range from small scrapes, cuts, bruises, and falls to bites and stings. The risk of more serious injury would be unlikely, but certainly exists. Injuries may be a natural consequence of the volunteer activity being undertaken, as a result of environmental hazards (including terrain and weather), a result of errors in judgment or other negligence of the staff, volunteer, or other individuals. Injuries may occur in spite of the reasonable efforts of the staff to prevent them. In all cases, these inherent risks, and other risks which may not be inherent, whether or not described above must be accepted by those who choose to volunteer.

In consideration of the activity(ies) which I have agreed to participate in, I agree to the

following:

- I understand the nature of the activities that I will engage in. I understand there are risks of injury associated with these activities. I acknowledge and voluntarily assume the risks associated with these activities, inherent and otherwise, and whether or not described above, including those which may result from the negligent acts or omissions of other volunteers or staff.
- I hereby release, indemnify, and hold harmless New Orleans City Park Improvement Association on which the volunteer activity is conducted. I agree not to sue them for any liability for causes of action, claims and demands of any kind and nature whatsoever that may arise out of or relate in any way to my or my minor child's participation in volunteer activities.
- I accept responsibility for any expenses that may be incurred for any illness or injury that may result from my, or my minor child's participation in a volunteer opportunity.
- I hereby consent to the use by the City Park of photographs and video taken of me while in involved in volunteer activities, including but not limited to use in marketing material, on the website of City Park, or via social media. **Initial here if you do not consent : _____**

Prescreening Health Survey - to be conducted prior to registration and repeated 24 hours prior to event: People with COVID-19 have had a wide range of symptoms reported – from mild symptoms to severe illness. Symptoms may appear two to 14 days after exposure to the virus. If you have a cough and shortness of breath, difficulty breathing, or other Covid related symptoms, or have experienced close contact with someone with Covid, **do not volunteer for our event.** Continue to monitor your health conditions closely and seek medical attention if necessary.

I agree to report any change in my health status as it relates to the CDC published COVID-19 symptoms (cough, shortness of breath or difficulty breathing, fever, chills, repeated shaking with chills, muscle pain, headache, sore throat, or new loss of taste/smell) for a period of 14 days before and after my volunteer event. It is understood and I grant permission to the event organizer to make a reasonable effort to notify others I may have come into contact while volunteering so they can self-isolate themselves and monitor their own health status. It is understood that event organizers will NOT disclose my personal identity or reported health information. Additionally, at this event I understand that Social Distancing and PPE recommendations is required of all volunteers.

Volunteers are an important asset of City Park Improvement Association's workforce and make it possible for City Park to deliver critical services to the Park and Park users. As a volunteer with the City Park Improvement Association, I agree to:

- Conduct myself in a professional manner; maintaining high standards of integrity and honesty.
- Treat all members of the public, employees, and other volunteers with respect and courtesy.
- Avoid any activity that could be seen as a conflict of interest, such as accepting gifts

or favors from individuals or businesses that could be seen to be an attempt to influence City Park decisions.

- Respect confidential information that is available to me as a result of my volunteer work with the City Park, and refrain from using it for personal gain or for personal, or non- City Park business related reasons. Bring any violation of this confidentiality to my supervisor.
- Promptly raise questions and concerns regarding possible violations of City Park policy or local, State or Federal law with my immediate supervisor or another manager within my department.
- Reinforce the City Park Improvement Association's commitment to equal employment opportunity and a work environment free of discrimination and harassment, including sexual harassment.
- Abide by all City Park rules and regulations.

I understand that I may be released from my volunteer position with the City Park Improvement Association for not adhering to the guidelines outlined herein.

By filling in my name I agree that I have read, fully understand, and hereby agree to the terms of this agreement, voluntarily and with knowledge of the potential risks. I acknowledge that this agreement shall be effective and binding upon me, my heirs, assigns, personal representative, and estates. I have carefully read this Release and understand its contents, and I sign it as my own free act.

Signature of Volunteer

Signature: _____

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Name: _____

Date: _____

(If not age 18 or older, parent/guardian must co-sign below)

Parent/Guardian Signature: _____

Name: _____

Date: _____

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