Hunterdon County Volunteer Work
Individual Release

Event: Delaware River Joint Cleanup Program, September 21, 2019 8:30 to 12:30 pm,
Meet at ________________________________, Route 29

I do NOT give permission to use any photos of myself or my child taken during this program for publicity
or program literature: _______

I understand that participation in the Delaware River Joint Cleanup Program involves activities which
pose a potential risk of personal injury. Some examples of these activities include handling sharp or
heavy trash; working outdoors in weather that can turn unexpectedly hot, cold, windy, or stormy; and
walking on surfaces which can conceal sharp or hazardous objects. I/We assume all risks associated
with participation in the program and hereby for myself, my heirs, executors and administrators waive
and release The County of Hunterdon its governing body, officers and employees, Delaware Township
its governing body, officers and employees, the Township of Kingwood its governing body, officers and
employees, the City of Lambertville its governing body, officers and employees, the Township of West
Amwell its governing body, officers and employees, the Township of Stockton its governing body,
officers and employees, the Borough of Frenchtown its governing body, officers and employees, and the
State of New Jersey from all claims, liability, risk of loss or injury and damages of any kind including
wrongful death associated with or arising out of my/our participation in the proposed volunteer work. I
certify that I have reviewed and understand the Safety Guidelines. I understand that while those
materials contain instructions intended to protect me from injury, even my full compliance with those
instructions will not guarantee that no injury will occur.

IF A SIGNATORY IS LESS THAN 18 YEARS OF AGE
THIS MUST ALSO BE SIGNED BY A PARENT OR GUARDIAN!!!

Name(s) ______________________________________________________________________
(please print)

Age, if less than 18 _______

Signature of Individual        Date

Name of guardian (print) _________________________________________________________

(address if different than above)

Signature of parent/guardian Date