

Hunterdon County Volunteer Work

Individual Release

Event: Delaware River Joint Cleanup Program, _____, 2022. Starting at 8:30 am to 12:00 pm, Meet at _____, Route 29

I understand that by participating in the Delaware River Joint Cleanup Program I may be required to wear a mask/face covering, maintain social distance and comply with all applicable State Executive Orders and Directives of the Hunterdon County Health Officer at all times.

I understand that participation also 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, Holland Township its governing body, officers and employees, East Amwell Township its governing body, officers and employees, Delaware Township its governing body, officers and employees, Kingwood Township its governing body, officers and employees, the City of Lambertville its governing body, officers and employees, West Amwell Township its governing body, officers and employees, the Borough of Stockton its governing body, officers and employees, the Borough of Frenchtown its governing body, officers and employees, the County of Mercer its governing body, officers and employees, the Township of Hopewell its governing body, officers and employees, the Township of Ewing governing body, officers and employees, the City of Trenton its governing body, officers and employees, the Township of Hamilton its governing body, officers and employees, the State of New Jersey its governing body, officers and employees, the Pennsylvania Bureau of State Parks governing body, officers and employees and any other Township, Borough, Municipality or State entity that joins in the program after the signing of this form, 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) (print) _____

Address _____

Age, if less than 18 _____

Signature of Individual

Date

Name of guardian (print) _____

(Address if different from above) _____

Signature of parent/guardian

Date

Image Use and Release

I, _____ am a volunteer and/or the Parent or Guardian of _____, an underage minor.

I authorize and acknowledge that _____ (minor's name) or myself may be photographed and/or videotaped for educational and informational/publicity purposes (website, Facebook, Instagram, Brochures, etc).

I, _____ give the **County of Hunterdon** permission to use mine and/or my child's name likeness, image, and/or appearance of as such may be embodied in any pictures, photos, video recordings, audiotapes, digital images, and the like, taken or made on behalf of any program utilized by the **County of Hunterdon**. I agree that the **County of Hunterdon** has complete ownership of such pictures, images, representations, etc., including the entire copyright, and may use them for any purpose.

These uses include, but are not limited to, exhibitions, reprints, reproductions, publications, advertisements, and any promotional or educational materials in any medium now known or later developed, including the Internet.

I acknowledge that I will not receive any compensation, etc., for the use of such pictures, etc., and hereby release the **County of Hunterdon** and its agents and assigns from any and all claims which arise out of or are in any way connected with such use.

I have read and understood this consent and release.

I give my consent to the **County of Hunterdon** and to use the name and image of _____ for the purposes outlined in this form.

Signature of volunteer and/or parent or guardian

Date