



GROUP INFORMATION

Group/Organization Name: _____

Group/Organization Address: _____

Organization Contact Person: _____

Contact Person's Phone: _____ Email: _____

EVENT INFORMATION

Name of event: _____ Date: _____

Start and End Time of Service: _____

PARTICIPANT NAMES

Please list the names and ages of all volunteers serving at this event. A signature is also required. If a volunteer is under 18, their parent or guardian must sign for them. (Please note that youth under 14 must have adult supervision at the event in order to volunteer.)

Volunteer Name (printed)	Age, if under 18	Signature of Volunteer (If Volunteer is under 18, Parent/Guardian must sign)
1		
2		
3		
4		
5		
6		
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12		
13		
14		
15		

Make copies of this page as needed for additional volunteers.

Email completed form to volunteer@gptx.org



This Release and Waiver of Liability (the "Release") is executed by the ("Organization Group Leader")
_____ [enter name] seeking to volunteer with the City of Grand Prairie, and I hereby accept full responsibility for each of the above participants to serve in the volunteer capacity. I understand that they will be expected to meet all of the requirements of the volunteer position, including attendance and adherence to the City of Grand Prairie volunteer policies and procedures. I understand that they will not receive monetary compensation for the services contributed or be guaranteed of any future position with the City of Grand Prairie. I further understand and agree that a volunteer is not an officer, agent, or employee of the City of Grand Prairie, and that their service in such activity shall not be construed or interpreted as such.

I ACKNOWLEDGE THAT, ON BEHALF OF MY GROUP OR ORGANIZATION, I ASSUME ALL RESPONSIBILITY AND RISK OF ANY INDIVIDUAL WITHIN MY GROUP OR ORGANIZATION UNDER THE AGE OF 18 YEARS, PARTICIPATING IN THE GRAND PRAIRIE VOLUNTEER SERVICES PROGRAM AND AGREE, ON BEHALF OF MY GROUP OR ORGANIZATION, THAT MY GROUP OR ORGANIZATION WILL INDEMNIFY, HOLD HARMLESS AND RELEASE THE CITY OF GRAND PRAIRIE, ITS OFFICERS, AGENTS AND EMPLOYEES, FROM ANY AND ALL CLAIMS AND SUITS FOR PROPERTY DAMAGE, LOSS, OR PERSONAL INJURY, INCLUDING DEATH, SUSTAINED BY MY GROUP OR ORGANIZATION OR ANY PARTICIPANT IN MY GROUP OR ORGANIZATION IN CONNECTION WITH THEIR SERVICES, WHETHER OR NOT SUCH DAMAGES OR INJURIES ARE CAUSED DIRECTLY OR INDIRECTLY BY THE NEGLIGENCE OF OFFICERS, AGENTS OR EMPLOYEES OF THE CITY OF GRAND PRAIRIE. FURTHERMORE, I HEREBY AGREE, ON BEHALF OF MY GROUP OR ORGANIZATION, TO INDEMNIFY, HOLD HARMLESS AND DEFEND THE CITY OF GRAND PRAIRIE, ITS OFFICERS, AGENTS, AND EMPLOYEES, FROM ANY AND ALL SUITS, FOR PROPERTY LOSS OR DAMAGE AND/OR PERSONAL INJURY, INCLUDING DEATH, SUSTAINED BY ANY MEMBER OF MY GROUP OR ORGANIZATION OR BY OTHERS BY REASON OF MY GROUP'S VOLUNTEER PARTICIPATION.

THAT ALL VOLUNTEERS 17 YEARS OF AGE AND OLDER HAVE PROVIDED THEIR SIGNATURE ON THIS FORM AS THEIR ACKNOWLEDGEMENT OF THIS RELEASE AND WAIVER OF LIABILITY AND THAT THEY ARE HELD SOLEY ACCOUNTABLE FOR THEIR ACTIONS.

I certify that I have read this release thoroughly, that I understand its terms and conditions, and that I make this release and waiver voluntarily and have not relied upon any representations made by the City of Grand Prairie, its officers, agents, employees or volunteers.

Date: _____

Organization Group Leader & Title (Printed):

Organization Group Leader & Title (Signature):

Email completed form to volunteer@gptx.org