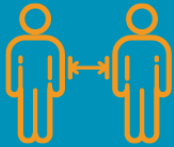




CLARK COUNTY SERVICE DAY

VOLUNTEER SAFELY



Maintain physical distance of at least 6 ft between you and others.



Volunteers must wear a mask at all times, especially when maintaining 6 ft. is difficult.



Stay home if you, or someone you have been in contact with feel unhealthy.



Remember to sign in and out before you leave your volunteer site.



Wash your hands before and after the event.

Organizing Partners:





2021 Clark County Community Service Day Volunteer Waiver

I, _____, hereby release, indemnify, and hold harmless Catholic Central School, City of Springfield, Clark County Combined Health District, Clark County Land Reutilization Corporation and the Clark County Solid Waste District, Clark State Community College, Community Health Foundation, Emmanuel Christian Academy, Mercy Health, Nehemiah Foundation, The Chamber of Greater Springfield and United Way of Clark, Champaign and Madison Counties, its officers, directors, employees, successors, assigns, legal representatives, organizers, sponsors, owners or lessees of project sites, volunteers and supervisors of all its activities, from any and all claims, causes of action, and liability arising from or in any way connected with my volunteer participation with the 2021 Clark County Community Service Day events. I further understand that I am expressly assuming all risk, including but not limited to, all risk of injury or death associated with my volunteer participation in the 2021 Clark County Community Service Day events.

I further grant permission to the organizers and project hosts to use, without cost, any photographs, videos, or audios taken of me during the 2021 Clark County Community Service Day for publicity purposes.

I acknowledge that I am of legal age, have read this release and am voluntarily and intelligently executing this release as a legal and binding document on this date:

_____, 2021.

Print Name _____ (Participant)

Signature _____

Parent/Guardian Signature _____

(If participant is a minor, signature of parent or guardian is also required.)

Business or Organization _____

Phone/Cell Number _____

Emergency contact and phone number _____

Organizing Partners:

