



## City of Montgomery

### Volunteer Participation Form

The City of Montgomery is committed to conducting its programs, services and events in a safe manner and holds the safety of City Volunteers in high regard. Equally, it is important that any Volunteer, or parent or guardian of child volunteering with the City, know the duties and responsibilities of the task they are undertaking, and the Volunteer has the physical and mental capacity to perform such tasks. With this in mind, by signing this document I acknowledge that (1) I understand the tasks I will be assigned and/or I will undertake, or which my child may be assigned or undertake, and (2) I certify that I am or my child is in the appropriate physical and mental condition to participate in such tasks as a Volunteer. I also understand there are certain risks involved in such tasks and I agree to assume all such risks including any damages resulting from physical injuries, death, loss of services or consortium, loss or damage to property, or any other loss which I, or my child, may sustain as a result of participating as a Volunteer for the City of Montgomery. I understand and agree that I may not use any power tools, specialized tools, or operate City equipment or vehicles without the expressed written permission of a City employed supervisor.

As a Volunteer for the City of Montgomery, I understand that any injury to myself or my child sustained as a result of my volunteer duties may be covered under the City of Montgomery's volunteer accident insurance as negotiated by the City year-to-year. Any coverage so provided will be governed by policy language which may provide benefits to me in excess of my personal health insurance coverage. I also understand that the City of Montgomery does not assume any responsibility for, nor obligation to provide, financial assistance or any other assistance to me or my family or child, including but not limited to medical, health, or disability benefits, in the event of injury, illness, death, or property damage sustained while volunteering for the City. If any injury should occur, it is my responsibility to complete a Volunteer Event Incident Report form.

Further, as a Volunteer my child and I or I agree that we will represent the City and ourselves appropriately in how we perform any tasks as a Volunteer, how we dress for the task and interact with the public.

Finally, I grant full permission to the City to use any photographs, videos, or recordings of myself, my child or minor for whom I am the legal guardian while volunteering for any purpose.

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\_\_\_\_\_  
Printed Name of Volunteer

\_\_\_\_\_  
Name of Legal Guardian, if under age 18

\_\_\_\_\_  
Signature of Volunteer

\_\_\_\_\_  
Signature of Legal Guardian, if under age 18

\_\_\_\_\_  
Emergency Contact Name

\_\_\_\_\_  
Today's Date

\_\_\_\_\_  
Emergency Contact Phone

\_\_\_\_\_  
Email Address

**Contact:**

DeAnna Gross, City of Montgomery Citizen Involvement Coordinator  
10101 Montgomery Road, Montgomery OH 45242  
Phone: 513-792-8329 Email: [dgross@ci.montgomery.oh.us](mailto:dgross@ci.montgomery.oh.us)