



Volunteer Agreement & Release from Liability Form

We are doing everything we can to protect you, our volunteers and our staff. To this extent, we will be following the Center for disease Control (CDC), Franklin County Health Department and State of Ohio guidelines in order to reduce the spread of COVID-19.

We require our volunteers to maintain six (6) feet of distance between themselves and others who are not from their household, as much as possible and utilize either cloth or surgical masks that cover both your mouth and nose at all times to reduce the risk of exposure to yourself and others while representing Green Columbus. It is also required to either wash or sanitize your hands after participating in a beach cleanup or after touching your face or mask.

By signing this waiver, you attest that you are clear of the following symptoms and situations within the last 14 days leading up to your cleanup:

- Fever of 99°F or above, or possible fever symptoms like alternating chills & sweating
- Cough
- Trouble breathing, shortness of breath or severe wheezing
- Chills or repeated shaking with chills
- Muscle aches
- Sore throat
- Loss of smell or taste, or a change in taste
- Headache
- Contact with an individual who has shown signs of the above symptoms within the past 14 days
- Have been around anyone with confirmed COVID within the past 14 days
- Have traveled to an area with high rate of infection within the last 14 days
- Diarrhea

On the day of the cleanup, we ask that you self-monitor your temperature. If you are exhibiting a fever of 99°F or above, we require that you do not volunteer at this time.

By signing this waiver, you understand that by participating in this cleanup on public property, you are susceptible to the risk of exposure to any illness including, but not limited to COVID-19 and will not hold Green Columbus liable for any symptoms of illness.

By signing below, you agree to comply with the written instructions above. Failure to comply with these written instructions or verbal instructions from staff may result in your removal from the Green Columbus volunteer program.



In consideration of being allowed to participate in any way in the The Columbus Fall Sweep and the related event and activities during the period of September 12-27, 2020, I the undersigned ("Participant"), acknowledge, appreciate, and agree that:

1. I am donating my time and services without any compensation from, and shall at no time be considered an employee or independent contractor of, Green Columbus for this event. The risk of injury from the activities involved in this program may be significant, including the potential for permanent paralysis and death.
2. I understand that Green Columbus and COSI (collectively, "Releasees") do not require me to participate in these activities. I will select the activities in which I will participate. I will choose activities that are within my physical capacities. I will stay away from the water if I cannot swim and/or if I have any open cuts. Should I choose to canoe in or wade in streams or rivers, I will do at my own risk and wear a life vest (PFD). I knowingly and freely assume all such risks, both known and unknown, even if arising from the negligence of the Releasees or others, and assume full responsibility for my participation.
3. I willingly agree to comply with terms and conditions for participation. If I observe any unusual and significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest official immediately.
4. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, hereby release, indemnify, and hold harmless Releasees and their officers, agents and employees, other participants, sponsors, advertisers, partners, and, if applicable, owners and lessors of premises used to conduct the event, from any and all claims, demands, losses, and liability arising out of or related to any injury, disability, or death I may suffer, or loss or damage to person or property, whether arising from the negligence of the Releasees or otherwise, to the fullest extent permitted by law.
5. I hereby acknowledge that I have been advised to consult a physician before engaging in such activities. In the event of an emergency, I authorize Releasees' employees or agents to secure any treatment deemed necessary for my immediate care from any licensed hospital, physician, or medical personnel. I agree that I will be responsible for payment of any and all medical services rendered.
6. I grant to Releasees and their representatives and employees, the right to take photographs and videos at this cleanup of me and of any minor participants for which I am the parent or guardian. I authorize Releasees, and their assigns and transferees, to use such photographs and videos, with or without names, for any lawful purpose, including such purposes as publicity, illustration, advertising, and Web content, and to copyright, use and publish the same in print and/or electronically.



I understand and recognize the [Policies](#) and [Terms & Conditions](#) for the services provided by GivePulse.

By registering for this event, I agree to the terms as outlined in the on-line registration. I also agree that if the respective group and GivePulse tapes and/or takes photographs, video, print, case studies, reports or evaluations of this event and/or my presentation, I give permission for the use and public display now and in the future of such for charitable, promotional and educational purposes and waive and release any claim to personal ownership of such.

Therefore, for and in consideration of the respective group and GivePulse allowing me to participate in this opportunity, be it virtual, remote, or in-person, I hereby release, relieve, and hold harmless the respective group, GivePulse, its staff, board members, and representatives from any liability or claim of liability, except such liability or claim of liability as may result from gross negligence on the part of the respective group, GivePulse or local community coordinators.

By registering and accepting the online check input, I acknowledge that I have read this release of liability, the policies, terms and conditions, and am signing it voluntarily.