



Sequatchie Valley Planning & Development Agency

SEQUATCHIE VALLEY HEADSTART

1510 Cedar Ave P.O. Box 769 • So. Pittsburg, TN 37380-0769

(423) 837-6724 • FAX (423) 837-9369

VOLUNTEER PROGRAM

Release of Liability

In consideration of being allowed to participate in the Volunteer Program by the Sequatchie Valley Planning and Development Agency, I acknowledge that working on projects can be a hazardous activity, and I assume all the risks associated with this work. I waive all claims for damages against the Sequatchie Valley Planning and Development Agency against its officers and employees for injury to my person or property, including death and destruction, that may arise from this activity, and I release the Agency and its officers and employees and agree to hold them harmless from any such liability. I understand that I am not eligible for claims under the worker's compensation process and that the only injury claim process would be claims made against the Agency's general liability insurance, currently provided by the Tennessee Municipal Risk Pool.

This agreement shall remain in force until I revoke it in writing.

Signature of Participant

Print Name

Date

Staff Representative / Center

Volunteers aged 12 through 17 must have parental consent.

This form may NOT be used for Minors. Parents or Guardians are required to sign the Parental Consent and Release of Liability form.

Adm. 10.1 rev 01-97