**Lake Allatoona Association (LAA)**

**(dba) The Great Lake Allatoona Clean Up (GLAC)**

**MEDICAL RELEASE, PHOTO RELEASE, & LIABILITY WAIVER FORM**

**Voluntary** - My participation in the Lake Allatoona Clean Up is voluntary. 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. A PFD (Personal Floatation Device) will be worn at all times while on a boat.

**Assumption of Risk** - I realize that during this Cleanup, there are several ways that I could potentially hurt myself if I am not careful or choose a task that I am not capable of doing. For example, I might choose to: (**a**) clean up a slippery stream or river banks; (**b**) canoe in or wade in streams or rivers that may contain strong currents or uneven bottoms; (**c**) clean up near highways or roads; (**d**) cut vegetation with sharp tools; (**e**) pick up sharp items; or (**f**) clean up in or near a stream or river that may contain harmful pollutants, bacteria, or parasites. I realize that my participation in any of these activities is strictly voluntary and that I assume the risks associated with these activities. I could: (**a**) receive cuts and abrasions; (**b**) lose personal property such as watches or jewelry; or (**c**) suffer serious bodily injury.

**Waiver** - I release the sponsors, organizers, volunteers, and site property owners (as well as all of their affiliates, directors, officers, trustees, employees, representatives, or agents) from all actions or claims of any kind that relate to my participation in the Cleanup. I understand and acknowledge that this waiver binds my heirs, administrators, executors, personal representatives, and assigns.

**Hold Harmless** - I hold the sponsors, organizers, volunteers, and site owners harmless and indemnify them against all actions or claims (including reasonable attorney’s fees, judgments and costs) with respect to any injuries, death, or other damages or losses, resulting from my participation in the Cleanup.

**Medical Treatment** - If I am injured during the Cleanup, the organizers or volunteers of the Cleanup may render medical services to me or request that others provide such services. By taking such action, the organizers and volunteers are not admitting any liability to provide or to continue to provide any such services and that such action is not a waiver by the organizers or volunteers of any rights under this release and waiver. Should I require transport to a medical facility as a result of an injury, I am financially responsible for such transportation and medical treatment costs. If I am injured during the Cleanup, it is my responsibility to seek appropriate medical care and to notify the Cleanup organizers. I understand that this waiver will have no bearing on any workers compensation claims that I may make as a result of my participation in this event.

**Pictures** - I agree that any pictures or videos taken of me or my children/dependents during the Cleanup can be used by The Great Lake Allatoona Clean Up for future promotional campaigns.

**I UNDERSTAND AND AGREE WITH THE CONTENTS OF THIS DOCUMENT. ANY QUESTIONS I MAY HAVE HAD ABOUT THIS DOCUMENT WERE ANSWERED TO MY SATISFACTION.**

Date:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Participant's Printed Name Parent's Printed Name (if participant is under 18)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Participant’s Signature Parent's Signature

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Emergency Contact Person:

Emergency Contact's Phone Number:

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**SIGN-IN SHEET**

**Please read the following safety points and procedures and sign below:**

1. Never work alone.
2. Always wear work gloves, shoes, and protective clothing.
3. Know the location of the first aid kit for your cleanup site.
4. Be careful when handling broken glass, sharp objects aerosol cans, and containers that may contain chemicals or chemical residues. **When in doubt - DON'T PICK IT UP**!
5. Watch out for snakes, wasps, and hornets in debris piles and other vegetated areas.
6. Watch out for poison ivy and poison oak. If you are uncertain what it looks like, ask the event organizer to point it out.
7. Do not disturb any large drum-like containers. Report the locations of such items to your zone captain and/or event organizer.
8. Use common sense about lifting heavy objects. Get help. Don't try to remove objects that cannot be removed safely.
9. Stay clear of any and all animals in the area including dogs.
10. Report any accidents or injuries to your zone captain and/or event organizer immediately.
11. Be aware of river flow - fast moving water can be dangerous. Do not wade in water over your knees.
12. Stay away from the water if you cannot swim.

I have read the above safety procedures that I am to follow while participating in this waterway cleanup. I acknowledge that I am voluntarily participating in this event and that I am responsible for my own safety. In case of an emergency, please contact the person I have listed on this form.

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| --- | --- | --- |
| Participant’s Name, E-Mail, Address, & Phone Number | Participant’s Signature | Emergency Contact Info (Name & Phone Number) |
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