



**CHARTER TOWNSHIP OF WEST BLOOMFIELD  
DEVELOPMENT SERVICES DEPARTMENT  
ADOPT-A-SAFETY PATH PROGRAM**

**VOLUNTEER RELEASE OF LIABILITY**

**PLEASE PRINT**

**NAME:** \_\_\_\_\_  **ADULT**  **YOUTH**  
**ADDRESS:** \_\_\_\_\_  
**CITY:** \_\_\_\_\_ **ZIP:** \_\_\_\_\_  
**EMAIL:** \_\_\_\_\_ **PHONE:** \_\_\_\_\_

**PARTICIPANT COMPANY/GROUP:** \_\_\_\_\_  
**PARTICIPATION PERIOD:** \_\_\_\_\_

**PLEASE READ BEFORE SIGNING:**

Upon my signing of this release, I hereby volunteer to be a participant in the West Bloomfield Adopt-a-Safety Path Program and I agree to abide by all rules and regulations set forth by the Volunteer Program.

I acknowledge that participation in these events and activities may involve risk of physical injury to any individual undertaking such activities or damage to their property. I hereby expressly assume such risk and hereby agree to hold harmless, release, waive, and discharge the Charter Township of West Bloomfield, its officials, employees, volunteers, agents, and representatives from any and all claims, losses, liabilities, damages, or expenses I might have as a result of physical injury incurred by my participation in said activities, and for damages of any kind to my property from participation in the Program.

I also give permission for West Bloomfield to take photos and use them in their publications and communications. I understand photos will be taken at this event and you have my permission for "free use of any photos".

This agreement shall be effective and remain in effect for the entire participation period.

I have read this agreement and I fully understand its terms, conditions and meaning as the language is clear and expresses the intent of the parties.

\_\_\_\_\_  
Signature Date

\_\_\_\_\_  
Signature of parent/guardian if under 18 years old