

**WAIVER OF LIABILITY
MAINE DEPARTMENT OF ENVIRONMENTAL PROTECTION**

Volunteer River Monitoring Program

The **Volunteer River Monitoring Program** (VRMP) is committed to conducting programs and activities in a safe manner and holds the safety of volunteers in high regard. The VRMP continually strives to reduce risks and asks that all volunteers follow safety rules and instructions that are designed to protect the volunteer's safety. However, volunteers must recognize that there is an inherent risk of injury when choosing to volunteer for the VRMP program. Examples of inherent risks include, but are not limited to, slipping on slick surfaces or falling down steep slopes and incurring bodily injury; being injured or killed by a vehicle or boat; being cut by sharp objects; and drowning/death.

Each volunteer is solely responsible for determining if he or she is physically fit and/or properly skilled for any volunteer activity.

It is strongly urged that all volunteers review their own health insurance policy for coverage. Please read the following carefully and be aware that in consideration for providing volunteer services, you will be expressly assuming the risk and legal liability and waiving and releasing all claims for injuries, damages or loss which you may sustain as a result of participating in any and all activities connected with and associated with your volunteer services (including transportation services/vehicle/and boat operations if provided).

As a volunteer, I recognize and acknowledge that there are certain risks of physical injury to volunteers in this program/activity, and I voluntarily agree to assume the full risk of any and all injuries, damages or loss, regardless of severity, that I may sustain as a result of my volunteer services. I further agree to waive and relinquish all claims I may have as a result of my volunteer services against the Volunteer River Monitoring Program, or Maine Department of Environmental Protection, including its directors, officers, employees, or volunteers (hereinafter collectively referred to as "Parties").

I do hereby fully release and forever discharge the Parties from any and all claims for injuries, damages, or loss that I may have or which may accrue to me and arising out of, connected with, or in any way associated with my volunteer services.

I have read and received a copy of the Safety Issues and Tips.

Volunteer's Name: _____

Volunteer Group(s): _____

Volunteer Signature: _____

Address: _____

Date: _____

If under the age of 18, this document must be read and signed by a parent or guardian. The minimum age for participation in the VRMP is 14 years old. Adult supervision is required in the field for minors.

Parent Name: _____

Parent Signature: _____

Date: _____ Age (if less than 18): _____

Relevant Information:

We ask that you take the following steps:

1. Follow the direction of the VRMP in the efforts to ensure a goal of safety for everyone involved. This may require changing plans or possibly canceling the survey.
2. Provide the information requested below to the VRMP prior to participation in the survey.
3. If the VRMP asks that you do not participate in an activity, please understand that this decision is made to protect you, other participants, and the VRMP.

2. Whom should VRMP contact in an emergency? (*optional*)

Name _____ Name _____

Phone Numbers _____ Phone Numbers _____

Relationship _____ Relationship _____