

CITY OF BRUNSWICK

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Cornell L. Harvey, Mayor
Felicia M. Harris, Mayor Pro Tem
John A. Cason, III, Commissioner
Julie T. Martin, Commissioner
Vincent T. Williams, Commissioner

City Attorney
Brian D. Corry

City Manager
James Drumm

VOLUNTEER WAIVER, RELEASE, HOLD HARMLESS AND INDEMNIFICATION AGREEMENT

I have agreed to serve as a volunteer for the City of Brunswick, and I recognize that my volunteer participation is an opportunity afforded to me by the City of Brunswick. I fully understand, appreciate and assume all of the risks associated with my volunteer duties. In exchange for my participation, I hereby agree to the following:

1. I voluntarily waive, release and hold harmless the City of Brunswick, its elected and appointed officials, officers, employees, agents and other volunteers from any and all claims, causes of action and damages for bodily injury or death that I may suffer as a result of, or in any manner connected with, directly or indirectly, my participation as a City of Brunswick volunteer when such bodily injury or death is the result of my own negligent or intentional acts or omissions or those of another volunteers. I understand that this waiver and release precludes my right to recovery of damages, in the event I am injured in the course of performing my volunteer duties.
2. I shall defend, hold harmless and indemnify the City of Brunswick, its elected and appointed officials, officers, employees, agents and other volunteers, from and against all damages, claims, liabilities, causes of action, judgments, settlements, costs and expenses (including, but not limited to, reasonable expert witness and attorney fees) that may at any time arise or be claimed by any person as result of bodily injury, death or property damage, or as a result of any other claim or cause of action of any nature whatsoever, arising from or in any manner connected with, directly or indirectly, my negligent or intentional acts or omissions in performing my volunteer duties for the City of Brunswick.

I have read, fully read and understand and agree to the assumption of risk, waiver, release, hold harmless and indemnification terms set forth above.

Date

Volunteer Signature

Printed Name

Volunteer Date of Birth

Emergency Telephone Number

www.brunswickga.org

AN EQUAL OPPORTUNITY EMPLOYER