

ALVIEW-DAIRYLAND UNION SCHOOL DISTRICT

WAIVER AND RELEASE FOR VOLUNTEER XING GUARDS

I am a competent adult and wish to perform volunteer services as a Student Xing Guard for the ALVIEW-DAIRYLAND UNION School District.

I understand that in performing these services I am not an employee of ALVIEW-DAIRYLAND UNION School District unless specifically designated as such by resolution of the Board of Trustees of the ALVIEW-DAIRYLAND UNION School District.

I also understand that the ALVIEW-DAIRYLAND UNION School District may not have all the insurance to provide me with complete coverage for the volunteer services I will be performing and further understand that it is my responsibility to maintain any insurance I may currently carry

I agree that if the volunteer services I will perform involve my providing transportation that I will complete an Agreement to Transport by Private Vehicle form and will carry automobile liability insurance on the vehicle used for such transportation.

By signing this contract I agree to forever waive and release any claim I may have or acquire, individually or on behalf of any other, against the ALVIEW-DAIRYLAND UNION School District, or any of its employees or agents, for property damage, personal injury, wrongful death, or any other claim of any sort whatsoever arising in any way out of the volunteer services I will be providing.

This Agreement is binding not only on me but also on any person who may claim to act on behalf of or represent me in any way.

I AM SIGNING THIS AGREEMENT FREELY AND VOLUNTARILY AND I UNDERSTAND THAT THIS AGREEMENT MAY HAVE SIGNIFICANT LEGAL CONSEQUENCES AND THAT BY SIGNING THIS AGREEMENT I MAY BE WAIVING RIGHTS WHICH I MIGHT OTHERWISE HAVE.

DATE: _____

(Signature of Person Providing Volunteer Services)

PLEASE PRINT:

Name

Address

Phone

School Name