

## ASSUMPTION OF RISK AND RELEASE OF LIABILITY

I, the undersigned, understand that the James River Regional Cleanup involves risk of injury and property damage to all participants, regardless of whether the participants are on or in the James River, Falling Creek, Falling Creek Reservoir, Appomattox River, or whether they remain on the shoreline. These waters can be dangerous, and the shoreline areas can be steep and unstable and otherwise hazardous. I assume all risk of injury and damage which might occur to myself or to the other participants listed below including the possible contraction of COVID-19 or other communicable diseases. I also certify that I have explained all of these risks to the participants listed below. I also understand that no participant whose name is not listed below is authorized or permitted to participate in the James River Regional Cleanup program.

I, the undersigned, do hereby forever, jointly and severally, release and discharge Appomattox County, Buckingham County, Chesterfield County, Goochland County, Henrico County, City of Hopewell, City of Petersburg, City of Richmond, the Commonwealth of Virginia, Chesapeake Bay Foundation, Friends of the Lower Appomattox River, James River Association, Keep Henrico Beautiful, Clean Virginia Waterways, James River Advisory Council (JRAC) and their agents, officers, employees and representatives from any and all liability, claims, demands, judgments, damages, actions and causes of actions resulting from my participation or the participation of the persons listed below, or any one of them, in the James River Regional Cleanup.

*I agree to be responsible for practicing applicable COVID-19 prevention safety measures as recommended or required by the Centers for Disease Control and Prevention (CDC), the Virginia Department of Health (VDH), Chesterfield County, and any applicable Virginia executive orders, including social distancing and face-covering requirements for individuals not in the same household.*

Acceptance of this assumption of risk and release of liability is not to be construed and shall not be construed as a waiver of the immunity of Appomattox County, Buckingham County, Chesterfield County, City of Hopewell, City of Petersburg, Goochland County, Henrico County, City of Richmond, the Commonwealth of Virginia, Chesapeake Bay Foundation, Friends of the Lower Appomattox River, James River Association, Keep Henrico Beautiful, Clean Virginia Waterways, or JRAC or of any of their agents, officers, employees or representatives.

In witness whereof, the parties have executed this document this \_\_\_\_\_(date).

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

### Please complete the following information:

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| <b>Site Location for Volunteering:</b>         |
| <b>Organization Name:</b>                      |
| <b>Name of Participant/Guardian (over 18):</b> |
| <b>Address:</b>                                |
| <b>Primary Phone Number:</b>                   |
| <b>E-mail Address:</b>                         |
| <b>List All Participants (under 18):</b>       |
| <b>Emergency Contact Name:</b>                 |
| <b>Emergency Contact Phone Number:</b>         |

Bringing/using your own boat?      Yes    No

Photo Release to use photos?      Yes    No