



City of Cañon City

P.O. Box 1460 • 128 Main Street
Cañon City, CO 81215-1460
(719) 269-9011 – Fax: (719) 269-9017

Community Development Department
Code Enforcement Division



“Keep Cañon Clean Team” Volunteer Application

Contact Information

Name _____

Street Address _____

Cañon City Limits Resident _____

Home Phone _____

Cell Phone _____

E-Mail Address _____

Availability

When are you available for volunteer assignments?

Days available:

Monday Tuesday Wednesday Thursday Friday

Hours available:

8 am to 10 am 10 am to noon noon to 2 pm 2 pm to 4 pm
 other

Please Specify other _____

Interests

Please tell us why you would like to be part of the “Keep Cañon Clean Team”?

Person to Notify in Case of Emergency

Name _____
Street Address _____
City, State & Zip Code _____
Home Phone _____
Work Phone _____
E-Mail Address _____

Our Policy

It is the policy of this organization to provide equal opportunities without regard to race, color, religion, national origin, gender, sexual preference, age, or disability. Thank you for completing this volunteer application form and for your interest in volunteering with us.

Agreement and Signature

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as a volunteer (uncompensated position), any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal. I understand that volunteers are needed from May until August and only from Monday to Friday 8 am to 5 pm.

Name (printed) _____
Signature _____
Date _____



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RELEASE OF LIABILITY AND INDEMNIFICATION AGREEMENT

VOLUNTEER MUST READ CAREFULLY BEFORE SIGNING

In consideration for being permitted to perform the below-described volunteer activities for the City of Cañon City (the "City"), I hereby acknowledge, represent, and agree as follows:

A. I understand that the following volunteer activities may involve risks of injury, loss, or damage. I further acknowledge that such risks may include without limitation bodily injury, personal injury, sickness, disease, death, and property loss or damage.

Activities to be performed: Patrolling neighborhoods by foot, bike or my own personal vehicle. Filling out courtesy notice door hangers to leave at a residence's front door or front gate and completing logs under the supervision of Code Enforcement staff.

B. By signing this RELEASE AND INDEMNIFICATION AGREEMENT, I hereby expressly assume all such risks of injury, loss, or damage to me or to any third party arising out of or in any way related to the above-described activities, whether or not caused by the act, omission, negligence, or other fault of the City, its officers or employees, or by any other cause.

C. By signing this RELEASE AND INDEMNIFICATION AGREEMENT, I further hereby waive, and exempt, release, and discharge the City, its officers, and its employees from, any and all claims, demands, and actions for such injury, loss, or damage, arising out of or in any way related to the above-described activities, whether or not caused by the act, omission, negligence, or other fault of the City, its officers, its employees, or by any other cause, excepting only the willful and wanton conduct of the City's officers or employees.

D. I further agree to defend, indemnify and hold harmless the City, its officers, employees, insurers, attorneys and self-insurance pool, from and against all liability, claims, and demands, including any third party claim asserted against the City, its officers, employees, insurers, or self-insurance pool, on account of injury, loss, or damage, including without limitation claims arising from bodily injury, personal injury, sickness, disease, death, property loss or damage, or any other loss of any kind whatsoever,

which arise out of or are in any way related to the above-described activities, whether or not caused by my act, omission, negligence, or other fault, or by the act, omission, negligence, or other fault of the City, its officers or employees, or by any other cause, excepting only the willful and wanton conduct of the City's officers or employees.

E. By signing this RELEASE AND INDEMNIFICATION AGREEMENT, I hereby acknowledge and agree that said agreement extends to all acts, omissions, negligence, or other fault of the City, its officers or employees, and that said agreement is intended to be as broad and inclusive as is permitted by the laws of the State of Colorado. If any portion hereof is held invalid, it is further agreed that the balance shall, notwithstanding, continue in full legal force and effect.

F. I understand and acknowledge that the City, its officers, employees and attorneys are relying on, and do not waive or intend to waive by any provision of this RELEASE AND INDEMNIFICATION AGREEMENT, the monetary or any other rights, immunities, and protections provided by the Colorado Governmental Immunity Act, C.R.S. § 24-10-101, et seq., as amended, or otherwise available to the City, its officers, employees or attorneys.

G. I understand and agree that this RELEASE AND INDEMNIFICATION AGREEMENT shall be governed by the laws of the State of Colorado, and that jurisdiction and venue for any suit or cause of action under the agreement shall be in Fremont County, Colorado.

H. This RELEASE AND INDEMNIFICATION AGREEMENT shall be effective as of the date set forth below and shall be binding upon me, my successors, representatives, heirs, executors, assigns, and transferees.

VOLUNTEER SIGNATURE AND DATE:

Volunteer - Print Name: _____

Volunteer's Signature: _____

Date: _____