

Keep Norfolk Beautiful Volunteer Sign-in Sheet and Waiver *(Please print legibly)*

Date: _____

Organization/Group Name: _____

Event: _____

Time in: _____

Time Out: _____



By signing in, I hereby state that I fully understand the risks involved in volunteering for this project and have been informed of all KNB safety guidelines. I also understand safety is my responsibility, and that if injured, I am to notify my group's project leader immediately. I further understand that volunteers are not covered under the City of Norfolk's Workers Compensation Plan, and that it is recommended for volunteers to have their own medical insurance coverage. I also understand that I—or the participant who I represent—may be photographed and/or videotaped while participating in this activity. I agree to allow the City of Norfolk Department of Public Works' Bureau of Keep Norfolk Beautiful to use said photographs and/or videotapes in Department publications, media publications and/or for educational or safety training purposes. I further waive any compensation for publishing and/or printing such photographs. **I understand that by affixing my signature on this form that I attest to having read, fully understand and agree to the conditions as set forth above and in the KNB Safety Guidelines and that, as of the date listed above, I pose no health risk to others.**

| Name | Email <i>(Please print legibly)</i> | Signature | Please add me to KNB Newsletter? (Y/N) | Accompanying child (ren) < 18 Circle Y/N # In Group |
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