

## TEEN VOLUNTEER PARTICIPANT AGREEMENT

Participant's Name:	
Address:	Phone:
Program/Event:	
Avondale, Maricopa County, Arizona, and a are or might be liable, from any and all clair against it or them, including transportation t regard, I covenant to indemnify and hold ha including reasonable attorneys fees which m	o participate in and er discharge the Mayor and Council of the City of any and all other person, firms, or corporations who ms of any kind or character which I have or may have or or from any portion of this program, and in that rmless the foregoing from any loss or damages, may be by them incurred in the event of any such nem. I additionally permit the free use of my name
	F THE CONTENTS OF THIS RELEASE BY EALIZE THAT BY SIGNING THIS DOCUMENT I HICH I MAY BE ENTITLED.
Volunteer Signature:	Date:
Parent/Guardian Signature (if under 18):	Date:
Parent or Guardian Phone Number:	