



Burlington Land Trust

PO Box 1153 • Burlington, CT 06013

<https://www.burlingtonlandtrust.org>

The mission of the Burlington Land Trust is to acquire, preserve and protect land of scenic, natural or historic value in perpetuity for the benefit of present and future generations.

RELEASE OF LIABILITY BY AN ADULT VOLUNTEER

Volunteer Name: _____

Site: _____

Supervisor(s): _____

Date(s) of Participation: _____

Volunteer type:

_____ General Volunteer _____ Community Service _____ Court Ordered Community Service

Offense: _____

Hours required: _____

General description of work: _____

In consideration of my participation as a volunteer with the Burlington Land Trust ("BLT"), I state and agree as follows:

I agree to follow the instructions of the Supervisor(s) named above. I have been instructed in and understand the use of equipment I am to use. I understand that my participation as a volunteer may involve sustained strenuous physical activity and exposure to certain risks, including, but not limited to dangers associated with working outdoors, possibility in remote areas, working with and in proximity of animals and working with and in proximity of machinery.

I am in good health and am aware of no physical problem or condition that will limit or interfere with my ability to participate in this volunteer activity.

I agree that I am participating as a volunteer at my own risk and acknowledge that BLT has made no warranty or representation, expressed or implied, regarding the safety of this volunteer experience.

I expressly release and hold harmless BLT and its officers, directors, employees, and agents from and for any and all claims, demands, actions and causes of action whatsoever on account of any loss, damage or injury to person or to property suffered or incurred by me in connection with the volunteer experience or any aspect of it, including, but not limited to, any transportation arranged by, paid for, or provided by BLT.

This release shall be binding upon me and my heirs, next of kin, executors, administrators and assigns. By signing below, I acknowledge that I have thoroughly read and understand this form and that the statements I have made are all true.

Participant's Name (print): _____

Participant's Name (sign): _____ Date: _____