

VOLUNTEER RELEASE FORM

ORGANIZATION: _____

NAME: _____ TELEPHONE: _____

ADDRESS: _____

EMERGENCY CONTACT: _____ TELEPHONE: _____

I hereby release, indemnify, and hold harmless the City of Port Aransas and its officers, directors, agents, and employees, and the organizers, sponsors, and supervisors of all its activities (hereinafter referred to as "Persons Released"), from and against any and all suits, actions, losses, damages, claims, or liability of any character, type, or description, including all expenses of litigation, court costs, and attorney's fees, for injury or death to any person, or injury to any property, received or sustained by any person or persons or property, arising out of, or in conjunction with, Nueces County, and the work site:

On this date _____, including claims, liability, and damages arising in the whole or in part from the negligence of the Persons Released. **Notwithstanding the above, such release shall not operate in any case where the effect is to invalidate any applicable liability insurance coverage maintained by the above named agency.** I likewise release, indemnify, and hold harmless any person transporting me to or from any activity or event, including claims, liability, and damages arising in whole or in part from the negligence of the person transporting me to or from any directed activity or event.

It is my expressed intent that the indemnity provided in this release form is extended by me to protect (1) the Persons Released and (2) any person transporting me to or from any activity or event from consequences of their acts or omissions including negligence, whether that such alleged negligence is the sole or contributory cause of the resultant injury, death, or damage.

In addition City of Port Aransas has my expressed permission to use any **photographs or videos** taken of me for publicity purposes.

Signature: _____ Date: _____