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Volunteer Liability Release and Indemnification Agreement

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Email: _____

I agree to abide by all rules and regulations of Children’s Fairyland regarding safety and use of all equipment.

Liability Release:

I, _____ understand that I am not an employee, agent, subcontractor, or independent contractor of Children’s Fairyland. I understand that Children’s Fairyland will not provide me with compensation, insurance, worker’s compensation, or any other benefits of an employee. In consideration of my being allowed to work as a volunteer for any purpose, I agree to forever discharge and agree to indemnify and hold harmless the City of Oakland, Children’s Fairyland and its officers, directors, managers, employees, agents and subcontractors, against all damages, losses, claims, demands, costs and expenses (including, without limitation, attorney’s fees and court costs), and liabilities of any nature whatsoever which may arise from my activities as a volunteer.

Signature: _____ Date: _____

Parent Signature: _____ Date: _____

(if under 18)

Yes! I would like to receive emails about upcoming **volunteer opportunities**.

Yes! Please add me to the Fairyland **general announcement** email list.