

## CITY OF MOUNTAIN VIEW

FINANCE AND ADMINISTRATIVE SERVICES DEPARTMENT • RISK MANAGEMENT DIVISION 500 Castro Street • Post Office Box 7540 • Mountain View • California • 94039-7540 650-903-6060 / 650-903-6053 • Fax 650-963-3087 / 650-963-3129

## RELEASE OF LIABILITY AND INDEMNIFICATION AGREEMENT

		("Organization") will volunteer and be permitted on the City
of Mountain V	iew's property at	on,, to participate in a voluntary special event ("").
from	to	, to participate in a voluntary special event ("").
		Mountain View (hereinafter "City") allowing Organization to participate, Organization agrees to the following conditions:
employees, ago but not limite operations of C Agreement. C	ents, and volunte d to, personal ir Organization or O ity shall cooperat	by law, Organization shall defend, indemnify, and hold City, its officers, ers harmless from any liability for damage or claims of same, including, njury, property damage, and death, which may arise from services or rganization's contractors, subcontractors, agents, or employees under this e reasonably in the defense of any action, and Organization shall employ cceptable to the City Attorney.
coverage for reagrees to a wai	covery. Organizativer of any right t	the event of a loss, Organization shall look solely to their own insurance ation's insurance coverage is primary and noncontributory. Organization o subrogation which any such insurer Organization may have contracted of the payment of any loss under such insurance.
recognizable, guardian if the	Organization wil	otograph, video, or likeness of a person in which the face is clearly l obtain a photograph release signed by the individual, or by their 18 years of age. It is Organization's sole responsibility to obtain and n.
Organization. Agreement has has read this c inducements h	It is further un s been freely ente locument and ful ave been made to	t this Release is a legally binding contract between the City and addrestood and agreed that this Waiver, Release, and Indemnification red into and is binding on Organization and their assigns. Organization lly understands its contents and obligations. No oral representations or o Organization to sign this Release. Organization understands that while of an agent of the City.
THIS	IS A RELEASE	OF YOUR RIGHTS – READ CAREFULLY BEFORE SIGNING.
Signature		Date
Print Name and	d Title:	Phone:
Address:		