City of Monessen Snow Angels Program

Registration Form to Volunteer for Snow Removal

First Name:	Last Name:
Phone Number (preferably cell):	
Email Address:	
Home Address:	
What neighborhood can you shovel in?	
Are you volunteering as part of an organization? If yes, which one?	
Do you want to receive text messages regard	ing the Snow Angels Program? YesNo
Do you want to receive emails regarding the S	Snow Angels Program? YesNo
Do you want to be contacted about more volu in the future? YesNo	unteer opportunities in the City of Monessen,
Are you under the age of 18? YesNo If yes, please have your parent/guardian sign	at the bottom of this document.
Participants (volunteers and requestors) remuneration, or compensation for services.	must not pay or receive any payment, This program is voluntary.
Snow Angels Program (the "Program") for I myself and any of my personal representativ	ticipate as a Volunteer in the City of Monessen Fall/Winter Season 2020-2021, I, on behalf of res, heirs, and next of kin, hereby COVENANT

NOT TO SUE and to HOLD HARMLESS, RELEASE, AND INDEMNIFY the City of Monessen, its officers, agents and/or employees (hereinafter referred to as the "Releasees") from any and all liability, claims, demands, actions and causes of action whatsoever, brought by any party against any party, arising out of my participation in the Program and whether caused by the negligence of the Releasees or otherwise. This RELEASE, WAIVER OF LIABILITY and INDEMNIFICATION AGREEMENT shall remain valid in perpetuity and shall include all possible claims of negligence or other causes of action that could be asserted against the Releasees by me.

I warrant and represent that I understand and accept the conditions of my participation as a Volunteer in the City of Monessen Snow Angel Program for Fall/Winter Season 2020-2021, having full authority to do so. I recognize that my participation in the Program shall not include any interactions or communications with recipient owner(s) of private property except to the extent necessary to perform requested snow removals. I further recognize that no entry inside the residence(s) of any recipient owner(s) is permitted in conjunction with my participation in the Program and that I will only enter upon the premises of properties whose owner(s) have requested snow removal therefrom for the purpose of performing requested snow removals.

I acknowledge that the recipient owner(s) of the property bears responsibility for compliance with all State law and City ordinances including maintenance of the property's yard, sidewalks, structure exterior and interior, and that City is not responsible for said maintenance nor does it guarantee the condition or safety of the private properties whereupon I may perform snow removal as entailed by my participation in this Program. I also acknowledge that as a Program Volunteer I will not be an employee of the City of Monessen and/or acting as an agent on behalf of the City.

I further understand that the undertaking of this activity may result in personal injuries and/or damage to private property and agree that the City will not be responsible for any such property damage and/or personal injuries resulting from my participation in this Program.

I further expressly agree that the foregoing RELEASE, WAIVER OF LIABILITY AND INDEMNITY AGREEMENT is intended to be as broad and inclusive as is permitted by the law of the Commonwealth of Pennsylvania and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

I HAVE READ AND VOLUNTARILY SIGN THE RELEASE AND WAIVER OF LIABILITY AND INDEMNITY AGREEMENT, and further agree that no oral representations, statements, or inducements apart from the foregoing written agreement have been made.

Participant Name (Print):

Participant Signature:

Parent/Guardian Signature (If under 18):

Date: