City of Prospect Heights, Illinois

Volunteer Waiver of Liability

The City of Prospect Heights, Illinois, through its Natural Resources Commission and its Park District, provides a periodic program to seed new native and other plants, remove invasive species and to conduct periodic spraying/removal of vegetation from city and park district property. The "Native Plant Enhancement and Invasive Species Removal Program" is facilitated through volunteers who donate their time to help keep the city free from invasive species and to promote the growth of native species on city

Volunteers are advised of the hazards associated with r	oadside work and work with hazardous
chemicals, and are given instruction by the park district	and police personnel to properly and safely
perform the removal of invasive species and planting of	native vegetation. Volunteers must wear safety
vests and goggles, provided by the city, and are advised	to wear weather protective clothing, such as
boots and rubber gloves.	
If volunteer is under the age of 18, please use "Underag	ge Volunteer Waiver of Liability" form.
I (print name)	am aware that the work
contemplated in the Native Plant Enhancement and Inv	asive Species Removal Program involves certain
risks of physical injury and death. Being fully informed a	s to these risks and in consideration of accepting
the opportunity to participate in the Native Plant Enhar	cement and Invasive Species Removal Program, I
hereby, on behalf of myself and my heirs, assume all ris	ks in connection with my participation in this
program and further hold harmless the City of Prospect	Heights, its officials, employees and agents for
any injury or damages which may occur to me while I ar	m participating in this program, and I waive any
right to bring claim or lawsuit against them for any such	injury, damage or death.
Furthermore, I agree to hold harmless, defend and inde	mnify the City of Prospect Heights, its officials,
employees and agents from any and all claims and laws	uits for injury, loss or damage to other persons
or entities which may arise in the future as a result of or in connection with my participation in the Native Plant Enhancement and Invasive Species Removal Program, except for injuries or damages	
I understand and acknowledge that the City provides no	
provision of any benefit by any third party.	·
I understand that I will be acting at all times as a volunt	eer and not an employee of the City and as such I
am not eligible for worker's compensation benefits in the	
As a volunteer for the City of Prospect Heights, I acknow	
and limited supervision regarding my duties as a volunt	• • • • • • • • • • • • • • • • • • • •
appropriately and follow all safety practices.	
I authorize any necessary emergency medical treatmen	t that might be required for me in the event of
physical injury and/or accident to me while participating	•
Please Print Name	
Signature of Volunteer Date	
Address (If under 18, please refer to the back) Email	
In case of an emergency, please contact:	
Name	Relation
Address	
Phone	_