

VOLUNTEER'S ACKNOWLEDGEMENT, WAIVER and RELEASE OF LIABILITY

Type of Volunteer Activity: General Volunteer Date(s):			
		In consideration of the event organizer allowing me the oppo- event:	ortunity to participate in the above named program or
		known conditions that would be impacted in an	of age or older, that I am in good health, and have no by way by performance of my volunteer duties. My or sponsored by Cameron Clark Concert Productions
Cameron Clark Concert Productions LLC, the	ion in activities and events organized or sponsored by City of Bend, Bend Metro Parks and Recreation Iding injuries or illness to person and damage or loss to		
associated with my participation in, travel to an noted program or event, I do hereby, for myself WAIVE, RELEASE AND DISCHARGE and a	suffered or sustained by me which is in any way ad from, or other activity associated with the above f, my heirs, my administrators and executors, forever agree to indemnify for any and all rights and claims, for may have or which may hereinafter accrue, against:		
Cameron Clark Concert Productions LLC/C Bend Metro Park and Recreation Oreg Munch and Music Non-Profit	on Liquor Control Commission		
 agents, successors and assigns. In the event that I am unable to do so on my ow aid and other medical treatment in the event of I understand that at this event or related activiti 	espective representatives, officers, directors, employees, who because of injury, I consent to administration of first injury and agree to pay to costs of such treatment. es, I may be photographed. I agree to allow my photo, nate purpose by the event holders, producers, sponsors,		
This VOLUNTEER'S ACKNOWLEDGMENT, WAIVER a broadly to provide a release and waiver to the maximum exter I hereby certify that I have read this document and that I und	ent permissible under applicable law.		
Volunteer's Name (Please Print)	Volunteer's Signature		

Date Signed