

Salt Marsh Planting in Lower Narrow River: May 2017
Town of Narragansett - Narrow River Preservation Association
ADULT Volunteer/Participant Registration and Waiver Form
For Volunteers/Participants ages 18 and over

Please return to NRPA at P.O. Box 8, Saunderstown, RI 02874 Email: nrpa@narrowriver.org

Volunteer/Participant Information

Name: _____

Address: _____ City/State/ZIP: _____

Telephone: _____ E-mail Address: _____

Emergency Medical Attention Information

Medical Concerns: Please identify and describe any and all medical/physical conditions which Town of Narragansett and Narrow River Preservation Association ("TON and NRPA") should be aware of, including, but not limited to, any health conditions that would preclude you from participating in any physical or other activities, any dietary restrictions, allergies, chronic health conditions, and or medications. _____

Emergency Contacts: Please list two emergency contacts

Name: _____ Relationship: _____ Day Phone: _____

Name: _____ Relationship: _____ Day Phone: _____

Informed Consent for Volunteer/Participant Waiver

I, _____, understand that I am volunteering on projects organized by TON and NRPA or participating in a TON and NRPA event or function. I understand that I am responsible for my actions and behavior, and I will only perform volunteer work or participate in activities that I am capable of and comfortable doing. Having read this waiver, knowing these facts and in consideration for the acceptance of my participation in TON and NRPA's organized and/or sponsored projects, events and functions, I, for myself and my heirs, assigns and representatives, waive and release and hold harmless TON and NRPA and their officers, directors, employees, members, agents, service partners, and/or sponsors, from any and all claims or liabilities, of any kind whatsoever, arising from, whether directly or indirectly, my participation in TON and NRPA organized and/or sponsored projects, events or functions.

Signature of Volunteer/Participant

Date

Informed Consent for Volunteer/Participant Representation in Publications

I grant permission for TON and NRPA to use any photos, film, digital imaging, videos, verbal and written statements of me or my likeness for promotional, web usage, or other uses by TON and NRPA either associated with the project, event, function, or otherwise. I hereby agree to allow TON and NRPA to use any photograph and/or likeness of me at any time during my participation in the project, event or function or thereafter, without my prior approval. I acknowledge/agree that I will not receive any compensation for the use of such materials. I hereby waive any and all claims to such compensation.

Signature of Volunteer/Participant

Date