Site Coordinator:	Event:			Date:					
Please legibly write your name and contact information. Read the Volunteer Guidelines and the Waiver & Release of Liability (below). Sign to the right to acknowledge you've read and agree to both. ( <i>Note: If volunteer is a minor, parent or guardian must sign.</i> )									
Name:	Phone:	Email:							
Street Address:	City:	Zip:				Signature			
How did you learn about this event?	□ Poster/Flyer □ Website	☐ Word of Mouth ☐ E	mail 🗆 Postcard	☐ City Newsletter	□ Other:				
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Waiver & Release of Liability									
I am voluntarily participating in the City	of Oakland's Public Works vol	unteer program. I have rea	ad and agree to folk	ow the Volunteer Guid	delines. I a	cknowledge my participation in			
these events does not come without the			· ·	•	•				
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legal action against the City of Oakland,		• , ,				•			
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departments, officers or agents, neglige									
applies to all losses, whether known or unknown, suspected or unsuspected, related to my participation in this activity. I hereby grant permission to the City of Oakland to use photographs and video of me taken during this activity on its website and in other publications, at the City's sole discretion and without further consideration. This Waiver and									
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