



## **VOLUNTEER WAIVER AND RELEASE OF ALL CLAIMS FOR THE CITY OF THE VILLAGE OF INDIAN HILL**

### ***OPERATION OF A CHAIN SAW***

Thank you for volunteering to assist with Indian Hill Bridle Trail maintenance program.

***Please read this form carefully and be aware that in volunteering you will be waiving and releasing all claims for injuries, including death, you might sustain arising out of this participation.***

As a volunteer in this program, I recognize and acknowledge that there are certain risks of physical injury inherent in the operation of a chain saw. I agree to assume the full risk of any injuries, including death, damages or loss of personal property which I may sustain as a result of participating in any and all activities connected with or associated with this program. I further agree to use proper personal protective equipment and safe operating procedures, including the following:

- Clear away dirt, debris, small tree limbs and rocks from the saw's chain path. Look for nails, spikes or other metal in the tree before cutting.
- Shut off the saw or engage its chain brake when carrying the saw on rough or uneven terrain.
- Keep hands on the saw's handles, and maintain secure footing while operating the saw.
- Proper personal protective equipment must be worn when operating the saw, which includes hand, foot, leg, eye, face, hearing and head protection.
- Do not wear loose-fitting clothing.
- Be careful that the trunk or tree limbs will not bind against the saw.
- Watch for branches under tension, they may spring out when cut.
- Gasoline-powered chain saws must be equipped with a protective device that minimizes chain saw kickback.
- Do not refuel chainsaw while it is running.
- Be cautious of saw kick-back. To avoid kick-back, do not saw with the tip. If equipped, keep tip guard in place.
- Identify at least two paths of escape in the event of an accident.

**Release and Waiver.** I do hereby release and forever discharge and hold harmless the City of the Village of Indian Hill, Ohio, their officials, employees, and volunteers from any and all liability, claims, demands, and losses, including reasonable attorneys' fees, which I or my heirs, assigns, next of kin or legal representatives may have or which may hereinafter accrue with respect to any bodily injury, personal injury, illness, death or property damage which arise or may hereafter arise from or is in any way related to my participation in this program, whether caused wholly or in part by the

simple negligence, fault or other misconduct, other than intentional or grossly negligent conduct, of the City of the Village of Indian Hill, Ohio or of other volunteers.

***I have read and understand the above Waiver and Release of All Claims.***

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

I certify that I am 18 years of age or older:  Yes  No

I have the following tools, skills, certifications that will help with this project:

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