



**ECONOMIC DEVELOPMENT AND FINANCE
ALLIANCE OF TUSCARAWAS COUNTY**

339 Oxford Street
Dover, Ohio 44622

Phone: (330) 602-4422
Fax: (330) 364-4690

HARRY EADON
President &
Executive Director

KELLI BAKER
Administrative
Assistant

JASON RICKER
Business
Development Director

DEAN BISCAN
Facilities Manager

Volunteer Waiver Form for Person Under Age 18

This is to acknowledge that the following person desires to volunteer his/her services to the Economic Development & Finance Alliance of Tuscarawas County for no compensation. I understand that I will receive no monetary benefits in return for the volunteer service I provide and that the Economic Development & Finance Alliance of Tuscarawas County may terminate this agreement at any time without prior notice. I also understand that I will not be covered by health insurance or workers' compensation coverage.

I hereby agree that all use of the Southern Gateway Nature Park shall be undertaken at his/her sole risk, and that the Economic Development & Finance Alliance of Tuscarawas County shall not be liable for any injuries to user, or user's property, or be subject to any claim, demand, injury or damages resulting from acts of active passive negligence on the part of the Economic Development & Finance Alliance of Tuscarawas County, its officials, agents or employees. The undersigned, for him/her and on behalf of executors, administrators and assigns, does hereby expressly forever release and discharge the Economic Development & Finance Alliance of Tuscarawas County, its successor and assigns, as well as its officials, employees and agents, for all such claims, demands, injuries, damages, actions or causes of action.

As a volunteer, I agree to abide by all applicable rules and regulations of the Economic Development & Finance Alliance of Tuscarawas County and to fulfill the volunteer responsibilities to the best of my ability. By signing this form, I shall indemnify and hold harmless the Economic Development & Finance Alliance of Tuscarawas County against any claims and liabilities arising out of any injury, damage, action or cause of action to or by the undersigned or resulting from the undersigned's active or passive negligence. I further agree I shall be responsible for repairing or paying the cost to repair any property or natural resource damaged by organization's/his/her misuse or negligence.

JON ELSASSER
EDFA Board
Chairman

DAVE HANHART
EDFA Board
Vice Chairman

WENDY ZUCAL
EDFA Board
Secretary

COLLIN FAWCETT
EDFA Board
Director

CHARLIE JONES
EDFA Board
Director

Child/Minor Printed Name _____

Age _____ Birthdate ____ / ____ / ____

Child/Minor Address _____

Parent/Guardian Signature _____

Parent/Guardian Printed Name _____

Parent/Guardian Phone (_____) _____ - _____

Additional Emergency Contact _____

Phone Number (_____) _____ - _____