



CHIPPEWA OFF ROAD BIKE ASSOCIATION (CORBA)
WAIVER OF LIABILITY – WHILE PERFORMING VOLUNTEER WORK

NAME OF PERSON PERFORMING THE WORK

ADDRESS

ARE YOU 18 YEARS OF AGE OR OLDER? _____

TYPE OF WORK TO BE PERFORMED _____

LOCATION OF WORK

- Lowes Creek County Park; Eau Claire County, Wisconsin
- NW Community Park; Eau Claire, Wisconsin
- Otter Creek area; Altoona, Wisconsin
- Hickory Ridge Trails; Chippewa County, Wisconsin

DATES 2011

I am agreeing to perform non-paid volunteer work for the Chippewa Off Road Bike Association on the above named property(s). I acknowledge and agree that while performing this volunteer work for CORBA on the Property(s) that I am not an employee of CORBA or the Property Owners, nor am I entitled to any benefits that would normally be associated with employment for CORBA or Property Owners, including but not limited to: unemployment compensation, workers compensation, health care, wages, etc. I further understand that while I am performing volunteer work that I will not be supervised by CORBA or Property Owners.

I agree to assume full and complete responsibility for the use of all tools, including all power tools, chain saws, and/or other power equipment that may be used while performing the above referenced work. CORBA and Property Owners will not provide any equipment and / or tools to perform volunteer work. I acknowledge and understand that CORBA and the Property Owners assumes no responsibility for the use of any tools, power tools and/or power equipment used while performing volunteer work for CORBA on the above mentioned Property(s).

I agree to hold CORBA, the Property Owners, its officers, agents, supervisors, and employees harmless for any personal injury or property damage which I may incur while performing the above referenced work. Further, I agree to indemnify and defend (at the option of CORBA) CORBA or Property Owners, for any and all legal action filed against CORBA or the Property Owners, its officers, agents, supervisors and employees as a result of the work performed hereunder.

I have read, understand and agree to all of the above stated terms.

Date

Signature