

COMMUNITY CLEAN UP DAY April 2024 Registration Form

Town use only:	
Group Name:	
# of Participants_	

PARKS & RECREATION							
Please PRINT CLEAR	RLY usinç	y black or	r blue ink				
Family or Group Name (if applicable):							
Main Contact Information							
Name:							
Address:							
Email:		Phone: _					
Number of Participants in Group:			*Only shirts and water will be				
Please choose when you will need supplies	S:*		provided to Adopt a Streets while supplies last. If you are an Adopt a				
☐ Pick up Saturday morning April 20th at	Town Hall		Street and in need of additional				
☐ Pick up before event (we will contact yo	ou when re	eady)	cleaning materials, please contact Pamela Quick at (760) 240-7000				
☐ No supplies needed			ext 7561.				
Event shirts available for the first 300 participants only. Sizes are not guaranteed. Pre-registering your group will bypass registration at Town Hall the morning of April 20th. Please send in this form, roster list and liability waiver for EACH participant to register your group. We encourage you to help support this event by donating your own trash bags, water, and gloves! Supplies provided only while they last! For questions contact the Recreation Department: kdunn@applevalley.org (760) 240-7000 X 7879							
	T-Shirt	Summary:					
How did you hear about this event?	Size	Number]				
	YS		Attending Volunteer				
Are you an Individual/Group or Adopt a	YM		Appreciation Lunch:				
Street? Individual/Group (need a site)	YL						
<u> </u>	S		│ □ Yes				
Adopt a Street (active)	М		How many?				
Adopted Street	_ L						
Start	XL		□ No				
E I							

2XL





Group Roster

Participant Name	Shirt Size	Liability Waiver Attached

Town use only:	
Collected all Liability Waivers Added to participant log Supplies/Shirts ready Supplies/Shirts picked up	Supplies returned

COMMUNITY CLEAN UP DAY

April 2024 Participant

Photo Release, Release of Liability, and Assumption of Risk

The Town provides a full spectrum of recreation, sport, educational and equestrian programs for children, teens, adults and families to help create "A Better Way of Life." In consideration for the Town, permitting me, my children, or children for whom I have capacity to contract ("Participant(s)") to engage in Town recreation programs on and off Town facilities, I understand and agree to the following:

PHOTO RELEASE. I understand that from time to time Town representatives may photograph Participants at Town facilities and recreation programs. I acknowledge that by using Town facilities or participating in Town recreation programs, I authorize the Town of Apple Valley to take photographs of Participants and use or publish the photographs in the Town's publications, including its flyers, videos, or on websites. I understand that I will not receive any compensation for such use.

RELEASE OF LIABILITY. I hereby release, indemnify, defend, and hold harmless the Town of Apple Valley, its elected and appointed officials, its officers, clients, employees, agents, and volunteers ("Released Parties"), from any and all liabilities, claims, demands or causes of action (including attorneys' fees) that Participants may hereafter have for injuries and damages arising out of participation in any activities held at Town facilities or as part of a Town recreation program including, but not limited to, losses caused by the acts or omissions of the Released Parties or of obvious or hidden defects or dangerous conditions in Town facilities or Town recreation programs. This release shall release the Released Parties from related activities not conducted on Town property, including travel and off-site activities.

ASSUMPTION OF RISK. I understand that use of Town facilities and recreation activities may involve risks and dangers to Participants that no amount of care, caution, instruction or expertise can eliminate. I expressly and voluntarily assume all risk of injury or illness to Participants from any activity held at Town Facilities or as part of Town recreation programs. The Town is not responsible for any loss, theft or damage to personal property or Town equipment, articles, or facilities while Participants use said equipment, articles and/or facilities. I am aware that special interest classes are conducted by independent contractors, not Town personnel.

I have read and understood the Event Vendor Requirements, Vendor Acceptance Policies, Fire and Health Department Requirements and this application and agree to abide by the rules and requirements as set forth, therein and any others that may be implemented. I understand that failure to abide may result in a non-refundable loss of fees, not being allowed to set up the day of the event, or removal from the event, and may prevent my participation in future events held by the Town of Apple Valley.

Sign Here:		Date:	
	Printed Name		
On behalf of (I	ist names of minors)		
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