## ILLINOIS DEPARTMENT OF NATURAL RESOURCES

## Waiver and Release of Liability

The undersigned intends to perform volunteer work to benefit the interests of the State of Illinois, Department of Natural Resources, and therefore does waive all manner of action and actions, cause and causes of action, damage, claims, and demands, holding the Illinois Department of Natural Resources, their agents and employees harmless from any and all claims, demands, and liabilities on account of any injuries, losses, and damages to his/her person or property which might be caused, or may at any time arise, by reason of his/her orientation, training, duties, or temporary assignment for any purpose and while under the supervision of agents or employees of the Department of Natural Resources.

This "VOLUNTEER'S Waiver and Release of Liability" is freely given with full knowledge and intention to absolve completely, absolutely, and finally, the aforesaid parties, its agents and employees from any claims of loss, injury or liability resulting from any accident or other incident of unintended origin.

I certify that I am \_\_\_\_\_\_ years of age, having read and understand all of the above, do hereby understand the risks involved, and agree that this waiver and release shall be binding upon my heirs, executors, administrators, and assignors, and by affixing my signature below, agree to all proceeding provisions.

This agreement shall be in effect from this day forth, until revoked in writing or until the volunteer status is rescinded.

**NOTE:** Parent/Guardian signature also required if under 18 years of age.

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Name:		
Address:	(Print)	
City:	State: _	Zip Code:
Phone Number: ()		
Signature of Volunteer		Date
Parent/Guardian Signature		Date
IDNR Staff Signature		Date
Please Mail To:		
The Friends Adopt-A-Trail Program	n Administrat	or: Ray Sandrolini 821 25th Street
or email to:		Peru, IL 61354
adopt-a-trail@friends-hennepin-cai	nal.org	