

Adopt-A-Park Program Parental Waiver Form

Name of Volunteer:	Name of Volunteer:
Name of Volunteer:	Name of Volunteer:
Group (if participating with a group):	
Parent/Guardian Name:	Phone:
program. By signing this form, I hereby officers, agents, and employees from liab	listed above, I give permission to participate in the Adopt-A-Park agree to waive any claims and release the City of Cambridge and its ility for any claims, injuries, damages or causes of action incurred by a. I agree to hold harmless the City of Cambridge, its officers, agents, ctions arising from participation.
Signature of Parent/Guardian	