COASTSWEEP Volunteer Sign-In Sheet/Waiver Form

Cleanup Organizer: _____ **Cleanup Date:** _____ **Cleanup Location:** _____

I, a participant in the activities sponsored by COASTSWEEP agree to follow all cleanup instructions as stipulated by the local cleanup organizers/beach managers. I understand the work that I have volunteered to do and hereby state that I am qualified and physically capable of accomplishing the work and activities for which I have volunteered. I understand that I may be collecting various types of marine debris, including broken glass, metal pieces, and other materials that may cause injury if handled improperly. All materials of unknown contents, heavy weight, or questionable safety (medical debris, chemical containers, 55 gallon drums, fireworks…) will be left in place untouched, the location noted, and trained personnel informed. COASTSWEEP is an organization based on volunteers and has no responsibility for any injuries that occur during the cleanup.

I hereby release the Commonwealth of Massachusetts, the Massachusetts Office of Coastal Zone Management (CZM), and the Department of Conservation and Recreation (DCR), their employees, and agents from all liability, claims, loss, damage, expenses, and/or injuries, whether to person or to property, which may result from my actions while participating in COASTSWEEP volunteer activities. I further agree to indemnify, defend, and hold harmless the Commonwealth of Massachusetts, CZM, DCR, and their employees and agents from liability for any damage or injuries resulting from my actions while participating in volunteer activities approved or sponsored by CZM and DCR, that are found to be outside the scope of the approved activities. I also agree to comply with all DCR rules and regulations while on DCR property. I acknowledge that, by participating in these volunteer activities, I have not received an appointment to state service, and I will not receive a salary or payment from the Commonwealth. As such, I understand that I am not entitled to Workers Compensation and that I cannot make any claims against CZM or DCR for any injury, loss, or damage to person (including bodily injury or death) or property suffered while involved in COASTSWEEP volunteer work and, further, that I will provide my own health insurance.

I recognize that MGL c. 21, §17G provides that, pursuant to the provisions, requirements, and limitations of MGL c. 258 and the guidelines adopted by DCR, I shall not be liable for injury or loss of property or personal injury or death caused by my negligent or wrongful act or omission while acting within the scope of my volunteer activities. However, I acknowledge that I will not be indemnified under MGL c. 258, §9 for intentional torts or for the violation of a person's civil rights. I also acknowledge that in any litigation, the final determination of whether a person is considered an uncompensated employee is made the Attorney General's Office.

PHOTOGRAPHS - Also, by signing I provide consent that photographs of me taken at the cleanups can be used by the Commonwealth of Massachusetts, CZM, DCR and the Ocean Conservancy in publications, presentations, and on websites and sent to any media outlets to increase the publicity for the International Coastal Cleanup and to raise awareness of the problem of marine debris. In addition, you affirm that you own the rights to any of the photos you submit and agree to transfer those rights to the Commonwealth of Massachusetts, CZM, and the Ocean Conservancy.

I have read the waiver (check & Initial)	Name	Address	Contact Information (email, phone)
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