



2026 Volunteer Hold Harmless Agreement - Group Form

Hold Harmless Agreement. The Cosumnes Community Services District (District), their officers and employees, and any co-sponsor of its activities are not responsible for any injury which may be suffered by the participant while traveling to, during, or returning from volunteer service. The District has no medical insurance for individuals, and any injury to, or caused by, the participant will be the participant's sole and exclusive responsibility. Participant, or his/her parent or guardian if actual participant is under 18, shall be solely and exclusively responsible for any and all

property damage, personal or private, which the individual may cause during the course of an activity or event where he or she is serving as a volunteer. The undersigned acknowledges that they have read California Civil Code § 1542, which provides: A GENERAL RELEASE DOES NOT EXTEND TO CLAIMS THAT THE CREDITOR OR RELEASING PARTY DOES NOT KNOW OR SUSPECT TO EXIST IN HIS OR HER FAVOR AT THE TIME OF EXECUTING THE RELEASE AND THAT, IF KNOWN BY HIM OR HER, WOULD HAVE MATERIALLY AFFECTED HIS OR HER SETTLEMENT WITH THE DEBTOR OR RELEASING PARTY. The undersigned hereby waive all rights and protections otherwise available to them under Civil Code § 1542. This provision shall survive the expiration of the Agreement.

Media Release Agreement. The participant, or parent or guardian if actual participant is under 18, unconditionally authorizes and consents to the CSD using videotape, photographic, electronic and/or any other media image, quotations, likeness, or electronic or photographic reproduction in any manner, in whole or in part, for all educational, promotional, marketing, news, or outreach activities of the CSD.

By signing below, I acknowledge that I have read and understand this notice and, if I am signing on behalf of a participant under the age of 18, I attest that I am that participant's legal guardian and am signing on behalf of the minor. I understand that this agreement is valid for the below-named individual when volunteering with the Cosumnes Community Services District in the 2026 calendar year.

#	Volunteer/Participant Name	Phone	Email	Time	Signature (Parent/Guardian if minor)	Date
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						