



**Town of Fountain Hills  
Make a Difference Day  
October 22, 2016  
7:30 a.m. – 12:30 p.m.  
Meet at Golden Eagle Park  
REGISTRATION**

**REGISTRATION DUE OCTOBER 5<sup>TH</sup>**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

\*Email: \_\_\_\_\_

\*Need email in order to send work project assignment

If you are registering for more than yourself, how many volunteers are in your group? \_\_\_\_\_

Please list how many people are in each age category for yourself/your group:

\_\_\_\_\_ Preschool

\_\_\_\_\_ Ages 5-12

\_\_\_\_\_ Ages 13-17

\_\_\_\_\_ Ages 18 and older

Please list each group member's name(s) below and their email address for notifications:

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_ (attach list with more names)

Please list any limitations at a work placement: (outdoor allergies, no lifting, etc)

Please select your preferred project type: Circle 2 (some projects may be in a town park)

\_\_\_\_\_ Painting

\_\_\_\_\_ Landscaping/Planting

\_\_\_\_\_ Cleanup/Construction



**Return Completed and Signed Registration & Waiver to:**

Town of Fountain Hills  
16705 E. Avenue of the Fountains  
Fountain Hills, AZ 85268

**WAIVER AND RELEASE OF ALL CLAIMS**

Please read this form carefully and be aware that by participating in the **Fountain Hills' Make a Difference Day**, you will be waiving and releasing all claims for injuries you might sustain arising out of said program.

I recognize and acknowledge that there are certain risks of physical injury to participants in **Fountain Hills' Make a Difference Day** and I agree to assume the full risk of any such injuries, damages or loss regardless of severity which I may sustain as a result of participating in any activities connected or associated with **Fountain Hills' Make a Difference Day**. I waive and relinquish all claims I may have against the Town and its officers, agents, servants and employees as a result of participating in **Fountain Hills' Make a Difference Day**. I hereby fully release and discharge the Town and its officers, agents, volunteers and employees from any and all claims from injuries, damage or loss which I may have or which may accrue to me on account of my participation in **Fountain Hills' Make a Difference Day**. I further agree to indemnify and hold harmless and defend the Town and its officers, agents, volunteers and employees for, from and against any and all claims resulting from injuries, damages and losses sustained by me and arising out, connected with, or in any way associated with any activities of **Fountain Hills' Make a Difference Day**.

I have read and fully understand the **Fountain Hills' Make a Difference Day Program** details and waiver and release of all claims.

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**Print Name**

**Signature**

**Date**

Please contact Vol. Coordinator, Heather Ware, [hware@fh.az.gov](mailto:hware@fh.az.gov) with questions