Illinois Department of
Natural Resources
One Natural Resources Way Springfield, Illinois 62702-1271
www.dnr.illinois.gov

JB Pritzker, Governor
Colleen Callahan, Director

VOLUNTEER REGISTRATION FORM, WAIVER, RELEASE AND INDEMNIFICATION AGREEMENT
(Expires 1-year from date signed)

Location/Site:_____

Volunteer Activity:_____

Date(s) of Volunteer Activity:_____

Volunteer Name:_____

Volunteer Group (if applicable): _____

Volunteer Email:_____

Volunteer Address: _____

_____
City State Zip Code Phone

EMERGENCY CONTACT INFORMATI)N
MUST BE COMPLETED

_____
Emergency Contact Relationship Phone

WAIVER, RELEASE AND INDEMNIFICATION AGREEMENT

PLEASE NOTE: THE INDIVIDUAL VOLUNTEER AND VOLUNTEER GROUP (GROUP) MUST ALSO READ AND SIGN THE BELOW WAIVER, RELEASE AND INDEMNIFICATION AGREEMENT (AGREEMENT).

IN ORDER TO BE ALLOWED TO PARTICIPATE AS A VOLUNTEER OF/WITH THE ILLINOIS DEPARTMENT OF NATURAL RESOURCES (IDNR) IN THE ABOVE-MENTIONED IDNR EVENT/ACTIVITY, THE INDIVIDUAL VOLUNTEER AND GROUP HEREBY UNDERSTAND AND AGREE TO INDEMNIFY, RELEASE, DEFEND AND HOLD HARMLESS THE STATE OF ILLINOIS AND THE IDNR, ITS OFFICERS, EMPLOYEES, AGENTS, INVITEES AND LICENSEES FROM ANY AND ALL COSTS, EXPENSES, LOSSES, CLAIMS, DAMAGES, LIABILITIES, SETTLEMENTS, INVESTIGATIONS BY ANY LOCAL, STATE OR FEDERAL REGULATORY AGENCY,

INQUIRIES, JUDGMENTS, FINDINGS, COSTS AND EXPENSES AND REASONABLE ATTORNEYS' FEES (INCLUDING THE REASONABLE VALUE OF TIME SPENT BY THE ILLINOIS ATTORNEY GENERAL'S OFFICE) AND THE COSTS AND EXPENSES AND REASONABLE ATTORNEYS' FEES OF OTHER COUNSEL REQUIRED TO DEFEND THE STATE OF ILLINOIS AND/OR THE IDNR RELATED TO OR ARISING FROM: (1) ANY BREACH OF THIS AGREEMENT; (2) ANY NEGLIGENT, INTENTIONAL OR WRONGFUL ACT OR OMISSION OF THE INDIVIDUAL VOLUNTEER, THE GROUP AND ITS MEMBERS OR ANY AGENT, CONTRACTOR OR SUBCONTRACTOR UTILIZED OR EMPLOYED BY THE INDIVIDUAL VOLUNTEER OR THE GROUP ; (3) THE INDIVIDUAL VOLUNTEER'S OR GROUP'S PERFORMANCE OR ATTEMPTED PERFORMANCE OF ANY RIGHT, DUTY OR OBLIGATION UNDER THIS AGREEMENT AND/OR (4) A COVID-19 ILLNESS AND/OR ANY OTHER ILLNESS(ES) CAUSED BY, OR DIRECTLY OR INDIRECTLY RELATED TO, THE COVID-19 PANDEMIC. THE FOREGOING INDEMNIFICATION OBLIGATION SHALL SURVIVE THE TERMINATION OR EXPIRATION OF THIS AGREEMENT.

The Volunteer/Group, while participating in the above-mentioned IDNR event/activity, understand and agree to:

(a) Comply with all Executive Orders the Office of Illinois Governor has issued, or will issue, pertaining to the COVID-19 pandemic;

(b) Comply with all guidelines, regulations and rules the federal Centers for Disease Control and Prevention and the Illinois Department of Public Health have issued, or will issue, pertaining to the COVID-19 pandemic.

The Volunteer/Group understand and agree that the scope of his/her/its relationship with the IDNR is limited to a volunteer position and that no compensation of any kind, including benefits, is expected in return for participating in the above-mentioned IDNR event/activity.

The Volunteer/Group agree that there are any number of risks associated with participating in the above-mentioned IDNR event/activity.

The Volunteer represents that he/she is in good health and suffers no physical impairment that will or could prevent participating in the above- mentioned IDNR event/activity.

The Volunteer hereby grants and conveys to IDNR all rights, title and interest in any and all photographs, images, videos or audio recordings of his/her likeness or voice in connection with participating in the above- mentioned IDNR event/activity.

Volunteer/Group may use their own personal equipment for approved projects if pre-approval is granted by the Site Superintendent. Volunteer/Group assume full responsibility for safely using this equipment and will hold IDNR harmless for any damage incurred to their equipment. Volunteer/Group may NOT use state owned power equipment of any kind. The Site Superintendent can determine if the Volunteer/Group need to use a licensed vehicle, golf cart, ATV/UTV, in conjunction with the duties associated with this volunteerism, in which case, a Vehicle Authorization form MUST be completed, delivered to and signed by the Site Superintendent.

The Volunteer understands and agrees that he/she is responsible for obtaining insurance coverage in the event of personal injury or illness or damage to any property while or because of participating in the above- mentioned IDNR event/activity.

The Volunteer understands and agrees that this Agreement is intended to be as broad and inclusive as permitted by the laws of the State of Illinois and furthermore understands and agrees that if any portion of this Agreement is deemed invalid, the remaining portions shall continue in full legal force and effect.

All volunteers, including those listed on a group roster, MUST complete the Authorization for Release of Criminal History Information form.

AGREED:

_____

Printed Name of Volunteer

_____

Signature of Volunteer Date

For those volunteers under 18 years of age, Parent/Guardian signature is required:

_____

Printed Name of Parent/Guardian

_____

Parent/Guardian Signature Date

The Group understands and agrees that this Agreement is intended to be as broad and inclusive as permitted by the laws of the State of Illinois and furthermore understands and agrees that if any portion of this Agreement is deemed invalid, the remaining portions shall continue in full legal force and effect.

AGREED:

_____

Printed Name of Group's Authorized Representative and Title with Group

_____

Signature of Group's Authorized Agent Date

GROUP LIABILITY INSURANCE POLICY REQUIREMENT

The Group whose volunteers will be performing volunteer services at the above-named IDNR site shall procure and maintain policies of (1) general public liability insurance coverage for the agreement of indemnity provided for under this Volunteer Registration Form/Waiver, Release and Indemnification Agreement and (2) a broad form general liability endorsement protection of not less than $1,000,000 under a combined single limit of coverage insuring the IDNR, as an additional insured, and the Volunteer Group from all claims, demands or actions for injury to or death of any person or persons and for damage to property made by, or on behalf of, any person or persons, firm or corporation, arising from, related to or connected with the activities of the Group at the Site. **THE GROUP SHALL (1) PROVIDE IDNR A COPY OF THE GROUP'S CERTIFICATE OF INSURANCE THAT CLEARLY LISTS IDNR AS AN ADDITIONAL INSURED AND (2) COMPLETE AND SUBMIT TO THE SITE SUPERINTENDENT THE VOLUNTEER ROSTER BELOW.**

Volunteer Group Roster

Name	Name