

Signature: \_

Approved by: \_\_\_

Office of the Borough Manager

## BOROUGH OF CONSHOHOCKEN

Office of the Borough Manager

## MAYOR

Yaniv Aronson

## **BOROUGH COUNCIL**

Tina Sokolowski, President Kathleen Kingsley Vice-President Anita Barton, Senior Member Alan Chmielewski, Member Stacy Ellam, Member Ralph Frey, Member Adrian Serna, Member

Stephanie Cecco Borough Manager

Hold Harmless/Indemnity Agreement for Event Volunteers	
In return for being allowed to participate in a volunteer event held by	(the "Volunteer Event")
within the Borough of Conshohocken, I,, to the	fullest extent of the law do hereby
release, hold harmless, and agree not to sue the Borough of Conshohocken, its agents and	employees for any claims, damages,
losses and expenses including but not limited to attorney's fees, that may be made by me,	my family, estate, heirs, or assigns,
for property damage, personal injury, wrongful death, or other form of damages, arising of	out of or resulting from my
participation in the Volunteer Event, however the same may occur and regardless of whet	ther or not such claim, damage, loss
or expense is caused in part by a party indemnified hereunder. Such obligation shall not be	be construed to negate or abridge, or
otherwise reduce any other right or obligation of indemnity, which would otherwise exist	as to any party or person, described
in this paragraph.	
I understand and agree that the Borough of Conshohocken is not responsible for any injur	ry or property damage arising out of
the Volunteer Event. I also understand that participation in the Volunteer Event involves	certain risks, including potential
injury and death, and am voluntarily participating in the Volunteer Event with knowledg	e of the danger involved and I agree
to accept all risks of participation. I also agree to indemnify and hold harmless the Boroug	gh of Conshohocken and its agents
and employees, for all claims arising out of my participation in the Volunteer Event.	
I understand that this document is intended to be broad and inclusive to the maximum ex	stent permitted by the laws of the
Commonwealth of Pennsylvania, and agree that if any portion of this Agreement is invalid, the remainder will continue in full	
force and effect.	
I fully understand that the Volunteer Event is not a Borough or Borough-sponsored event	
By signing below, I acknowledge that I have read and understand the above Hold Harr	nless and Indemnity Agreement.
Volunteer Event Organizer: Date(s) of Volunt	eer Event
Printed Name:	

Date: \_\_\_\_\_

Date: \_\_\_\_\_