

**KEEP HOBBS BEAUTIFUL COMMUNITY CLEAN-UP**  
**INDIVIDUAL REGISTRATION FORM AND WAIVER OF LIABILITY AGREEMENT**  
**(This Document Affects Your Legal Rights. Read Carefully Before Signing)**

**SECTION I**

Name & Business/Group Affiliation \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone: \_\_\_\_\_ Email \_\_\_\_\_

Emergency Contact : \_\_\_\_\_  
Name Phone

Are you accompanied by any minors? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please attach completed Supplemental Waiver of Liability for each minor with parent/guardian's consent.

**SECTION II.**

Please select all date(s) you would to participate:

Saturday, September 6th      Saturday, September 13th      Saturday, September 20th

**SECTION III.**

I wish to participate in the **“Keep Hobbs Beautiful clean-up initiative”** (hereinafter referred to as “Activity”), I state and affirm that:

1. I agree to a background check \_\_\_\_\_. (initial)
  - a. Driver license number\_\_\_\_\_.
  - b. Social Security number\_\_\_\_\_.
2. I consent to any photographs and/or videos taken during this initiative to be shared on any Hobbs media platform.
3. My participation is voluntary and may cease at any time. No one is forcing me to participate.

4. I understand that pursuant to 29 U.S.C. §203(e) (4) (A), I am not an “employee” of the City of Hobbs. As such, I will receive no compensation for the services I will provide. Additionally, if I am currently an employee of the City of Hobbs, the services I propose to engage in are not the same type of services which I am employed to perform for the City of Hobbs.
5. I acknowledge the Activity is NOT an ESSENTIAL service provided by or to the City.
6. I understand and acknowledge the Activity I am about to voluntarily engage in has certain risks. I understand these risks known or unknown, anticipated or unanticipated may result in serious injury, death, illness, disease or damage to myself or my property, or to other persons and their property. IMPORTANTLY: I ACKNOWLEDGE THAT ONE SUCH INHERENT RISK ASSOCIATED WITH THE ACTIVITY IS THE RISK OF INJURY. AS SUCH I ASSUME ALL RISKS ASSOCIATED WITH THE ACTIVITY.
7. In consideration of being allowed to participate in the Activity, I hereby personally assume all risks in connection with the Activity and I hereby agree to hold the City of Hobbs, their officials, employees, agents and contractors harmless and I waive any right to make claims or bring lawsuits against the City of Hobbs or anyone working on behalf of the City of Hobbs for any injuries, or damages related to the Activity.
8. I am physically fit to participate in the Activity. I acknowledge that I have adequate insurance coverage for “accidents,” and if not, that I have freely chosen not to obtain “accident” coverage and will assume financial responsibility for any accidents that may result. I FURTHER ACKNOWLEDGE THAT I WILL NOT BE PROVIDED INSURANCE COVERAGE FOR MY PARTICIPATION IN ACTIVITY BY THE CITY OF HOBBS.
9. This agreement is intended to be as broad and inclusive as is permitted by the laws of the State of New Mexico and if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.
10. The terms of this agreement shall bind the members of my family, if I am alive, and my heirs, assigns and personal representatives if I am deceased.
11. My signature indicates I have read this entire document, understand it completely, understand that I have given up substantial rights by signing, acknowledge that it cannot be modified or changed in any way by oral representations, have signed it freely and voluntarily without any inducement, assurance or guarantee, and agree to be bound by its terms.
12. **PARENTAL CONSENT AND RELEASE OF LIABILITY (IF PARTICIPANT IS UNDER 18 YEARS OF AGE):**  
The undersigned, legal parent, guardian or custodian of  
(Minor) \_\_\_\_\_, does hereby consent to the minor  
participating in the Activity and all terms and conditions contained herein.

**THE UNDERSIGNED HAS READ THE ENTIRE FOREGOING AGREEMENT AND FULLY UNDERSTANDS IT.**

Participant (or Parent/Guardian of Minor) Printed

Name\_\_\_\_\_ Date\_\_\_\_\_

Participant (or Parent/ Guardian of Minor) Signature

Name\_\_\_\_\_ Date\_\_\_\_\_

**Student's Acknowledgement (If Participant is Under 18 Years of Age):**

I am the minor individual identified in this Waiver of Liability Agreement, and I confirm that it is my desire to participate in the **District Cleanup** (Activity). I further understand that all of my activities at the **District Cleanup** (Activity) are performed on a voluntary basis only, and I have no expectation of compensation or other benefits whatsoever. I further understand that I am under no obligation to participate, and that I may cease participation at any time.

Student's Printed Name\_\_\_\_\_ Date\_\_\_\_\_

Student's Signature Name\_\_\_\_\_

**Volunteer's copy.**

**SAFETY PRECAUTIONS**

Do not pick up objects too heavy

Do not remove hazardous items

Wear sturdy footwear

Wear light colored clothes

Wear gloves at all times and avoid touching face

Wash hand after clean-up

Take breaks as needed and stay hydrated

Be aware of your surroundings and be careful where you step

Work areas could have a range or terrain, tall weeds, grassy areas, gravel, uneven areas, unmaintained or vacant lots, areas next to vehicle traffic.

Prepare for outdoors for example wear a hat, sunscreen and insect repellent