



VOLUNTEER ACTIVIST COMMITTEE

MEMBER APPLICATION

*Incomplete applications
will NOT be accepted.*

Full Name *Print.*

Local #

Retired? Yes No

Phone

Email

Address

Street & Apt #

City

State

Zip

I wish to participate in...

Mark all your interests.

- ...political activities sponsored by DC5.
- ...Women's Committee.
- ...supporting our military and First Nations members.
- ...demonstrations, pickets, CORE classes and other organizing activities.
- ...fundraising for DC5 sponsored charities.
- ...volunteering labor for charity and community.
- ...Retiree Activist Committee.

I agree to the terms listed on the opposite side of this form. →

Yes No

Signature

Date



VOLUNTEER ACTIVIST COMMITTEE

MEMBER APPLICATION

Release of Liability, Waiver of Claims, Assumption of Risks and Indemnity Agreement

In consideration of District Council 5 permitting my participation in the Volunteer Activist Committee (hereinafter referred to as "VAC"), I hereby agree as follows:

TO WAIVE ANY AND ALL CLAIMS that I may have against District Council 5 and their officers, employees, agents, representatives and affiliated local unions, and any volunteers in any way associated with the VAC, or any other organization for whom the VAC performs volunteer services (all of whom are hereinafter collectively known as "the Releasees").

TO RELEASE THE RELEASEES FROM ANY AND ALL LIABILITY for claims, liability, INCLUDING, BUT NOT LIMITED TO, NEGLIGENCE, BREACH OF CONTRACT, BREACH OF STATUTORY DUTY OF CARE OR BREACH OF ANY OTHER DUTY OF CARE and demands either in law or equity, to the fullest extent permissible by law, including but not limited to for any loss, damage, damages or losses caused by negligence, fault or conduct of any kind on the part of the released parties, including but not limited to death, bodily injury, illness, economic loss or out of pocket expenses, or loss or damage to property, which I, my heirs, assignees, next of kin and/or legally appointed or designated representatives, may have or which may hereinafter accrue on my behalf, which arise or may hereafter arise from my participation in VAC.

TO HOLD HARMLESS AND INDEMNIFY THE RELEASEES from any and all liability from property damage or personal injury to any third party, resulting from my participation in the VAC; and that, this Release of Liability shall be effective and binding upon my heirs, next of kin, executors, administrators and assigns in the event of my death.

I am the full age of eighteen (18) years and I have read and understood this Release of Liability prior to signing it, and I am aware that by signing this Release of Liability I am waiving certain legal rights which I, or my heirs, next of kin, executors, administrators and assigns may have against the releasees.