



# 2025 COVINA CHRISTMAS PARADE

## ADULT VOLUNTEER APPLICATION



Name: \_\_\_\_\_ Are you at least 18 years of age? \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Group/School/Company (if applicable): \_\_\_\_\_

Have you volunteered at a past parade? \_\_\_\_ Yes \_\_\_\_ No If yes, list area \_\_\_\_\_

Would you like the same assignment if available? \_\_\_\_ Yes \_\_\_\_ No

Can you stand for long periods? \_\_\_\_ Yes \_\_\_\_ No Can you walk for long periods? \_\_\_\_ Yes \_\_\_\_ No

Can you lift up to 25 pounds? \_\_\_\_ Yes \_\_\_\_ No

Do you have any special needs or physical limitations that require accommodation? \_\_\_\_ Yes \_\_\_\_ No

If yes, please describe requested accommodation \_\_\_\_\_

Volunteer shifts are available from 1 pm to 10 pm on Saturday, December 6. Please indicate the timeframe you are available and how many hours you are willing to volunteer:

Time: \_\_\_\_\_ Number of hours: \_\_\_\_\_

### Waiver and Release of Liability, Assumption of Risk and Indemnity Agreement

In and for consideration of volunteering for the Covina Christmas Parade and all associated activities included in the Covina Christmas Parade provided to the undersigned with the sole intent and understanding to volunteer, the undersigned his/her heirs, agents, employees, family members, friends, associates, assigns, representatives, next of kin, or any others forever releases and holds the City of Covina, its elected officials, employees, agents, directors, officers, council members (Releasees) harmless from all liability to the undersigned and the undersigned's personal representatives, assigns, heirs, next of kin, and agents for any loss or damage including, but not limited to serious bodily injury or death, or damage to any property and waives any claims and demands therefore, on account of injury or damage to the undersigned's person or property, including injury leading to death of the undersigned, whether caused by the active or passive negligence of the City of Covina, its employees, its elected officials, employees' agents, directors, officers, council members, and assigns while the undersigned is volunteering for the Covina Christmas Parade, including any and all vehicles and activities associated with the Parade. The undersigned agrees to indemnify, save and hold harmless the Releasees and each of them from any loss, liability, damage or cost and the undersigned assumes full responsibility for any risk of bodily injury, death or property damages.

*I have read this release and waiver of liability, assumption of the risk and indemnity agreement, fully understand its terms, understand that I have given up substantial rights by signing it, and have signed it freely and voluntarily without any inducement, assurance or guarantee being made to me and intend my signature to be a complete and unconditional release of all liability to the greatest extent allowed by law.*

Volunteer's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Return form to:** Via email to [paradevolunteer@covina.ca.gov](mailto:paradevolunteer@covina.ca.gov) or mail to:

**Covina Public Library**

**Attn: Veronica Palacios**

**234 N. Second Avenue, Covina, CA 91723**

**For information, please contact Veronica Palacios at (626) 384-5297 or [paradevolunteer@covina.ca.gov](mailto:paradevolunteer@covina.ca.gov).**