

**CLACKAMAS COUNTY
LIABILITY RELEASE FOR ADOPT-A-ROAD PROGRAM**

NAME OF GROUP: **CANBY LIVABILITY COALITION**

I, _____ hereby release Clackamas County, the Department of Transportation and Development, the Board of County Commissioners, its officers, employees and agents from any and all claims actions, demands, or claims for damages or personal injury to myself or damages to any property owned by me or others as a result of my performing community service activities under Clackamas County Adopt-A-Road Program.

Dated this _____ day of _____ 20_____

Signature

Street

City, State, Zip

If a minor, signature of parent or guardian is required:

Signature of Parent/Guardian

Street

City, State, Zip