



PARTICIPANT'S FORM NON-EMERGENCY MEDICAL TRANSPORTATION DISCLAIMER, WAIVER & INDEMNIFICATION

Welcome to the Volunteer Drivers Program. Through this program, volunteers may be available to provide non-emergency transportation to seniors for doctors' appointments up to two (2) times per month.

As a participant, you may be assigned a volunteer. Trips will be coordinated, with time and location verification through the Keen Center for Senior Resources. The assigned volunteer will contact you to re-confirm the time and location of the transportation. The City will make the determination if you meet the mobility and cognitive requirements to be eligible for volunteer transportation. The City and the volunteers cannot guarantee that a volunteer will be available for all ride requests. Also, you should NOT rely on the City or the volunteer to provide any type of emergency medical transportation. If there is an emergency, you should call 911.

It is not possible for the City to monitor all of the volunteers during their volunteer services, so it is important for you to assess their skills and your comfort level with them and to communicate questions or concerns to the City. By signing below, you acknowledge that you understand the City does not assess or guarantee the volunteers' character or driving skills, and you are not relying on the City in any way to do so. If for any reason you are not comfortable with the volunteer(s) assigned to you, please let the City know and another volunteer will be assigned as soon as possible.

If a situation arises that concerns the volunteer driver about the safety of the participant, the volunteer has been instructed to call 911, as well as to alert the staff at the Keen Center for Senior Resources. You should feel free to contact the City about any concerns or situations that arise from the program as well by contacting the Keen Center Program Specialist at (949) 724-6926 or (949) 724-6900.

In order to participate in the Volunteer Drivers Program, you agree to:

1. Complete the Emergency Contact Information Sheet prior to date of volunteer transportation.

WAIVER, RELEASE, AND INDEMNIFICATION

By signing below, the undersigned hereby releases, waives, and holds harmless the City of Irvine and its Council members, officers, employees, volunteers and agents (collectively "City Representatives") from any and all suits, claims, damages, losses, injuries (including property damage, bodily injury or death), and any other compensable loss of any type (collectively "Claims") to you and your family directly or indirectly arising out of your participation in the Volunteer Drivers Program, or out of the actions, conduct or inaction of the volunteers, whether or not the negligence of the City or City Representatives contribute to or cause the Claims. This release does not apply to the extent the Claims are caused by the gross negligence or willful or wanton misconduct of the City or City Representatives. You further agree to defend and indemnify the City and City Representatives from any and all Claims directly or indirectly arising out of the negligent, reckless or willful acts or omissions of you or your family.

I CERTIFY THAT I HAVE READ AND UNDERSTAND THIS AND AGREE ON BEHALF OF MYSELF AND MY FAMILY.

NAME*

DATE

SIGNATURE*

WITNESS SIGNATURE (Optional)*