



## RESIDENT REQUEST FOR SNOW SHOVELING/LAWNCARE ASSISTANCE

Complete the information below to receive a listing of participants in your area willing to assist with snow removal or lawncare for your property.

Title: \_\_\_\_\_ Mr.      \_\_\_\_\_ Mrs., Ms., Miss

Name of Resident/Homeowner:

\_\_\_\_\_ Last Name

I am requesting assistance with:

\_\_\_\_\_ Snow removal      \_\_\_\_\_ Lawncare (mowing grass)

Homeowner's Address:

\_\_\_\_\_ City

Home Phone Number: \_\_\_\_\_

Alternative Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

I qualify for assistance with shoveling or lawncare since I am:

\_\_\_\_\_ Senior Citizen      \_\_\_\_\_ Disabled

**Mail Form to:**

American Legion Civic Center

Attn: Ovie Salgado

6140 Dempster St.

Morton Grove, IL 60053

## REQUEST FOR SNOW SHOVELING OR LAWN CARE ASSISTANCE

### SNOW REMOVAL/LAWN CARE RECIPIENT

### RELEASE AND WAIVER OF ALL LIABILITIES

As the recipient of snow removal/lawn care assistance (the "Activity"), I hereby recognize and acknowledge that the participant snow shoveler/lawn care worker performing the Activity is not an agent, servant, or employee of the Village of Morton Grove. The participant is not performing the Activity at the behest of, or under the control or supervision of, the Village of Morton Grove, but rather at my request of and under my exclusive control and direction. Therefore, I agree that any claims or suits that I might pursue against the participant as a result of my participation in the Activity specified herein, including but not limited to, claims of property damage, personal injury, and intentional tort, are my sole responsibility. I release the Village of Morton Grove, the Department, and its officers, employees, attorneys, and agents from any judgments, payments, damages and claims, including all costs, expenses and attorneys' fees incurred by me in pursuing any such claim. I further release the Village of Morton Grove, the Department, and its officers, employees, attorneys, and agents, from any liability whatsoever for any and all acts or omissions of the participant, under any theory of vicarious liability or otherwise. I further agree to assume the full risk of any property damage or personal injuries which I may sustain as a result of participating in the Activity. I hereby waive, release and discharge any and all claims for property damage and personal injury, including death, which I may have, or which may hereafter accrue to me, as a result of my participation in the Activity. I agree to indemnify and to hold harmless the Village, the Department, and its officers, employees, attorneys, and agents from any loss, liability, damage, cost, or expense which they may incur as the result of my death, injury, or property damage that I sustain while participating in the Activity. This waiver, release and assumption of risk is binding upon my heirs and assigns. I further agree that if any claim or suit is pursued by me or on my behalf as a result of injuries from the Activity specified herein against the Village of Morton Grove, the Department, and its officers, employees, attorneys, and agents, I will Indemnify and Hold Harmless these parties from all judgments, payments, damages and claims, including all costs, expenses and attorneys' fees incurred by these parties in defending against such claim.

I understand that participants are high school aged students. I understand that participants will share their hourly rate with me prior to scheduling any services. I understand that once I register, it is my responsibility to communicate with participants directly to schedule services. I understand the Village of Morton Grove is providing me with contact information for participants. They are not scheduling my services or matching me with a specific participant.

**I HAVE CAREFULLY READ THIS WAIVER AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY, AND A CONTRACT BETWEEN THE VILLAGE OF MORTON GROVE AND ME, AND I SIGN IT OF MY FREE WILL.**

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Homeowner's Signature

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Date