PCTA Volunteer Sign-in Sheet

Project Name: _____

Crew Leader/Group: _____

Project Dates: _____

Project Location: _____

(include state and region if known)

This volunteer project is covered by a Volunteer Agreement with the:

☐ **U.S. Forest Service** covering the Pacific Crest National Scenic Trail and Feeder trails. With your signature, the Forest Service will: "Consider the participants as federal employees for the purpose of tort claims and compensation for work injuries, to the extent not covered by the sponsor".

☐ **Bureau of Land Management** covering the Pacific Crest National Scenic Trail and Feeder trails. With your signature, BLM will: "Consider the participants as federal employees for the purpose of tort claims and compensation for work injuries, to the extent not covered by the sponsor".

☐ **California Department of Parks & Recreation** (CDP&R) covering the Pacific Crest National Scenic Trail and Feeder trails. CDP&R DOES NOT provide Workman's Compensation for work injuries. Volunteers must provide their own insurance.

☐ **National Park Service** covering the Pacific Crest National Scenic Trail and Feeder trails. With your signature, the National Park Service will: "Consider the participants as federal employees for the purpose of tort claims and compensation for work injuries, to the extent not covered by the sponsor".

Liability Release

Your signature releases the Pacific Crest Trail Association, and its agents, employees, officers, coordinators, and directors from any and all liability in the event you or your animal are injured or killed while participating in this project . Participants under age 18 must have the signature of parent or legal guardian below.

Volunteer Name (please print)	Signature	Date