





Neighborhood/Project Name	
Project Coordinator	_
Dates of Project	_
The undersigned participant hereby certifies the following: (Coordinator—p	lease explain
these responsibilities to each participant and initial each item after done)	

- 1. I am over the age of 18 and will be using the equipment in R.U.B.Y. within Youngstown, Ohio.
- 2. I understand the written instructions on the proper operation and maintenance of the power equipment is in the binder labeled "R.U.B.Y. Tools Operator's Manuals" stored inside the trailer.
- 3. I will operate all equipment as instructed by the manufacturer's safety guidelines and in conformance with the instructions in the Operator's Manual.
- 4. I will return any borrowed items from R.U.B.Y. clean and in working order.
- 5. I understand I am responsible to pay for the replacement of any items from R.U.B.Y. not returned in the condition in which they were received (excluding normal wear and tear).
- 6. I will not use R.U.B.Y. or the items in R.U.B.Y. for commercial purposes.
- 7. I understand the use of this equipment may be dangerous and can result in injury or death. I agree to defend, indemnify, hold harmless, and release the City of Youngstown and any of its depart ments, agencies, offices, officers and employees from all damages claims, liabilities and expenses, including attorney's fees and legal costs, arising or resulting in any way from delivery, placement, presence, servicing and use of the R.U.B.Y. and the equipment stored within.
- 8. From the time R.U.B.Y. is delivered and placed until such time as it is removed by the Green Youngstown, the Project Coordinator will defend, indemnify, hold harmless and release the city and any of its departments, agencies, offices, officers and employees, from all damages, claims or liabilities and expenses, including attorney's fee and legal costs, arising or resulting in any way from delivery, placement, presence, servicing and use of R.U.B.Y. and equipment stored within.

# YOU MUST PRINT YOUR NAME, SIGN AND DATE THE OPPOSITE SIDE OF THIS FORM TO PARTICIPATE

(Over)









I have read and agree to the participant's responsibilities on the opposite side of the page. Sign below to indicate agreement:

Printed Name	Signature
	Date
Printed Name	Signature
	Date
Printed Name	Signature
	Date
Printed Name	Signature
	Date
Printed Name	Signature
	Date









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