

KEEP ALAMOGORDO BEAUTIFUL Event / Project Report

Event / Project	Date of Event	Group Name	
Contact Name	Address	Phone #	Cell #

Description of Work: _____

The persons listed below with their signatures acting through themselves or their authorized agent, hereinafter referred to as "Organization", for consideration agrees to defend, protect, indemnify and hold harmless the City of Alamogordo, Keep Alamogordo Beautiful hereinafter "City" and the New Mexico Department of Transportation hereinafter "Department", acting through its agents, representatives and employees, from and against any personal injury, property damage, liabilities, claims, damages, losses or expenses (including but not limited to attorney's fees, court costs and the cost of appellate proceeding) arising out of or resulting from the negligence, act or omission of the Organizations, its agents, members, representatives or employees in the performance of litter control or beautification on the following road(s)/area(s): _____, Provided, however, that such indemnification shall not extend to liability, claims, damages, losses or expenses, including attorney's fees arising out of the giving of or failure to give directions or instructions by the City and the Department is primary cause of bodily injury to persons or damages to property. Additionally, this agreement is subject in all cases to the immunities and limitations of the New Mexico Tort Claims Act (NMSA 1978, Sections 41-1-1 eq seq., as amended) and the common law, suffered by the Volunteer, its members and participants, the City, the State, or by third parties resulting from the performance of litter control or beautification activities for the duration of their contract with the City and the NM DOT Adopt-A-Highway program on their designated area.

Safety instructions attached to this form have been read and will be followed by the Organization throughout the duration of the litter control or beautification activities.

Name of Participants/Volunteers: _____

(For additional names use back of paper)

Signature of Authorized Agent	Date	Signature of City or Department Agent
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of Participants: _____ # of Hours Worked: _____ # of Trash Bags: _____ # Miles Cleaned _____

of Recycled Products: _____

Please fill out, sign and return form to: Keep Alamogordo Beautiful, 800 E. 1st Street., Alamogordo, NM 88310 Phone: 439-4250