



## **SENIOR CITIZEN (65+) AND DISABLED REQUEST FOR LEAF RAKING/SHOVELING**

### ***STUDENTS ASSISTING SENIORS (SAS)***

Thank you for your interest in Trumbull's *Students Assisting Seniors* (SAS) program which allows our Trumbull youth to receive community service hours for Leaf Raking and/or Snow Shoveling assistance for our seniors 65+ and disabled residents.

Attached you will find a Request Form for Raking and/or Shoveling assistance as well as a Release/Waiver of Liability Form that you will need to fill out and return in order to participate.

When you are in need of assistance, you will call the Trumbull Senior Center and they will contact a student seeking service hours. The Trumbull Center is open Monday-Friday, 9:00am – 4:00pm; please call during Center hours.

Services are limited to outdoor work only. This program is completely dependent upon the number of volunteers that sign up and their availability when needed. Assistance is not guaranteed.

The student will ask you to sign their Community Service time sheet at the completion of the job.

Thanks very much and if you have any questions please contact The Trumbull Senior Center at 203-452-5199.

Michele Jakab  
Director of Human Services &  
Trumbull Senior Citizens Commission



## REQUEST FOR LEAF RAKING/SNOW SHOVELING ASSISTANCE

### 2019-2020 School Year

If you are a senior 65+ or disabled Trumbull resident in need of assistance with Leaf Raking and/or Snow Shoveling, please complete the information below and return to:

The Trumbull Senior Center  
23 Priscilla Place  
Trumbull, CT 06611

A member of the Senior Center staff will contact you once they have received your paperwork.

#### **Name of Resident:**

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

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

Closest Elementary School to Your Home: \_\_\_\_\_

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

Email address: \_\_\_\_\_

I qualify for assistance because I am: \_\_\_\_\_ Age 65+ \_\_\_\_\_ Person with disability (age 18+)

I am interested in: \_\_\_\_\_ Leaf Raking Assistance  
\_\_\_\_\_ Snow Shoveling Assistance; \_\_\_\_\_ Walkway \_\_\_\_\_ Driveway  
\_\_\_\_\_ Fire Hydrant

I have the necessary materials for the student to perform the job: \_\_\_\_\_ Yes \_\_\_\_\_ No

Reminder – services are limited to the student's abilities and availability. Questions may be directed to the Trumbull Senior Center, 203-452-5199.

**REQUEST FOR LEAF RAKING AND/OR SNOW SHOVELING ASSISTANCE  
RECIPIENT RELEASE AND WAIVER OF ALL LIABILITIES**

As the recipient of snow removal/leaf raking assistance (the "Activity"), I hereby recognize and acknowledge that the Volunteer performing the Activity is not an agent, servant or employee of the Town of Trumbull or the Trumbull Public Schools. The volunteer is not performing the Activity at the behest of, or under the control or supervision of. the Town of Trumbull or the Trumbull Public Schools 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 Volunteer as a result of my participation in the Activity specified herein, included but not limited to, claims of property damage, personal injury and intentional tort, are my sole responsibility. I release the Town of Trumbull, the Trumbull Public School System and their officers, employees, attorneys and agents from any judgements, damages and claims, including all costs, expenses and attorneys' fees incurred by me in pursuing any such claim. I further release the Town of Trumbull and the Trumbull Public School System and their officers, employees, attorneys and agents from any liability whatsoever for any and all acts or emissions of the Volunteer 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 agree to indemnify and to hold harmless the Town of the Trumbull and the Trumbull Public Schools and their 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 Town of Trumbull and/or the Trumbull Public Schools, and their officers, employees, attorneys, and agents, I will indemnify and Hold Harmless these parties from all judgements, payments, damages and claims, including all costs, expenses and attorneys' fees incurred by these parties in defending against such claim.

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 Town of Trumbull, the Trumbull Public School System, and me, and I sign it of my own free will.

Date: \_\_\_\_\_

Homeowner's Name (please print): \_\_\_\_\_

Homeowners Signature: \_\_\_\_\_