

**Pinnacle Mountain State Park – Friends of the Ouachita Trail
Volunteer Liability Waiver Form**

I, _____ will be volunteering to perform trail maintenance on the Ouachita National Recreation Trail, with ***Friends of the Ouachita Trail (FoOT)*** at **Pinnacle Mountain State Park**.

I understand that, while reasonable care will be taken to ensure the safety of all volunteers, I am responsible for my own actions while a volunteer in any capacity for Pinnacle Mountain State Park, including, but not limited to, trail maintenance performed with Friends of the Ouachita Trail. I understand that work performed may not be under the direct supervision of a Park Staff member.

Neither the Arkansas Department of Parks and Tourism nor the Friends of the Ouachita Trail will be responsible for accidents or injuries to me or to minors in my charge, while participating as a volunteer. Minors **MUST HAVE** the signature of a parent or legal guardian to participate.

Please Print Legibly:

Name: _____

Phone: _____ Email: _____

Address: _____

Emergency Contact: _____

Relationship: _____ **Phone:** _____

Signature of Volunteer: _____

(Signature of Guardian if under 18)

Always contact the State Park prior to performing volunteer work giving info about where and when you will be working:

James Mullins

(501) 367-0405

james.mullins@arkansas.gov

Please return this form to:

Pinnacle Mountain State Park, 11901 Pinnacle Valley Road, Little Rock, AR 72223-5147

Friends of the Ouachita Trail
PO Box 8630, Hot Springs, AR 71910
FoOT@FriendsOT.org