

COMMUNITY SERVICE LOG

Name:	Date of Service:
Address:	Project Hours:
Telephone:	Organization: Tooele County Justice Court /____/ Wendover City Justice Court /____/
Tools:	

Job Description: _____

Job Location: _____

Release of Liability. The above-named individual has been authorized to participate in community service as part of a criminal sentence imposed by the Tooele County Justice Court or the Wendover City Justice Court. The above-named individual agrees that the City of Wendover, and its officers, employees and agents shall not be responsible for any injury, loss or damage sustained by the above named individual while participating in community service in the City. The above named individual agrees to hold harmless and indemnify the City of Wendover, its officers, employees and agents from any and all injuries, losses, damages associated with his or her community service provided by the City.

Dated:	 <hr style="border: 0; border-top: 1px solid black;"/> Signature of Community Service Provider
Supervised by: _____	Notes:
Title: _____	
Date: _____	