



## Thanksgiving-In-A-Box (Complete Family Dinner To –Go)

COVID may have changed how we do things but it cannot stop Thanksgiving. Colton families-in-need can receive an uncooked Thanksgiving dinner to go! *THANKSGIVING-IN-A-BOX* will include a gift card to purchase the turkey and fresh trimmings with canned goods and supplies to complete the meal. All request are first-come first-served basis and while supplies last.

### *HOW DO I GET A BOX?*

- Request Forms can be emailed, mailed or picked-up in person by appointment only Monday through Thursday, until November 5, at Luque Community Center, 292 East O Street, and Gonzales Community Center, 670 Colton Avenue
- Request Forms must be turned in by Appointment Only**  
NOTE: 'Boxes' are limited and request forms will not be received after November 6, 2020.
- For more information, contact Crystal Alcantar 909.370.5548 or [calcantar@coltonca.gov](mailto:calcantar@coltonca.gov).

<b>ADULT APPLICANT NAME:</b>		
<b>Address:</b>		<b>Apt. #:</b>
<b>City:</b>	<b>State:</b>	<b>Zip Code:</b>
<b>Home Telephone:</b>		<b>Alternate Telephone:</b>
<b>Email:</b>		
<b>How many TOTAL family members are in your home?</b>		
<b>How many children under 18 are in your home?</b>		
<b>How many adults are in your home?</b>		
<b>What is your monthly GROSS family income from all sources? (including support payments): \$</b>		

### PLEASE READ THE FOLLOWING BEFORE SIGNING THIS APPLICATION

I am aware that by participating in the aforementioned Activity, I may be exposed to risks of damage to personal property and injury. I understand and agree that I will comply with all relevant Colton Community Services rules, regulations, and instructions and that the failure to observe all rules may result in expulsion from the Activity and/or Facility.

### ***IN CONSIDERATION OF BEING PERMITTED TO PARTICIPATE IN THE ACTIVITY, I HEREBY, AGREE TO THE FOLLOWING:***

#### **ASSUMPTION OF RISK**

In consideration of being allowed to participate in the Activity, I hereby assume the risk of, and responsibility for, any such injury, death, or damage arising out of or in any way connected with participation, including injury, death, or damage resulting from any acts or omissions, whether negligent or not, or any property or equipment owned or supplied by or on behalf of Colton Community Services, the City of Colton, its officials, officers, employees, agents, volunteers, and any other City of Colton affiliate.

#### **RELEASE AND INDEMNIFICATION**

I agree on behalf of myself, my executors, heirs, administrators, and assigns, to release and discharge Colton Community Services, the City of Colton, its officials, officers, employees, agents, volunteers, and any other City of Colton affiliate from and against any and all liability arising out of or in any way connected with participation in the Activity, or upon their acts or omissions, whether negligent or not.

Additionally, in consideration for participating in the Activity, and to the maximum extent permitted by law, I voluntarily agree to indemnify and hold harmless, in advance, Colton Community Services, the City of Colton, its officials, officers, employees, agents, volunteers, and any other City of Colton affiliate, for any and all claims, lawsuits, demands, causes of action, costs, expenses, liabilities, losses, damages or injuries of any kind, in law or equity, to property or persons, including wrongful death, which may be brought by any person against Colton Community Services, the City of Colton, its officials, officers, employees, agents, volunteers, and any other City of Colton affiliate that may have or may hereafter accrue and that in any manner arise out of, pertain to, or are incident to said participation in the Activity, whether or not it consists of acts, omissions, or conduct which is deemed negligent (active or passive), willful, or otherwise. It is further understood and agreed that this waiver, release, and assumption of risk is to be binding on my executors, heirs, administrators, and assigns.



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**MEDIA RELEASE**

I hereby authorize Colton Community Services and anyone acting on its behalf to take and use any audio recording(s), photograph(s) and/or video(s) in which my image or voice appears for all purposes and in all media, including, but not limited to, written publications, brochures, advertisements, and the World Wide Web/internet. Colton Community Services shall have sole and complete ownership of the audio recording(s), photograph(s) and/or video(s), and shall have the exclusive right to make use of it/them, and any images or other productions derived from it/them, as set forth herein. I understand and agree that I will receive no monetary or other compensation for appearance in and Colton Community Services’ use of the audio recording(s), photograph(s), and/or video(s); and that this document shall serve as a release and waiver of any and all publicity rights and any other claims (including, but not limited to, privacy, contract, libel or defamation) arising out of the use of the audio recording(s), photograph(s) and/or video(s), and any right to inspect or approve the finished product or advertising or other communications that may be used with the audio recording(s), photograph(s), and/or video(s).

**KNOWING AND VOLUNTARY EXECUTION**

I have carefully read this Agreement and fully understand its contents. I understand that I am making the above representation herein on behalf of myself. I agree that I will follow all obligations herein or other directives provided by Colton Community Services, the City of Colton, its officials, officers, employees, agents, volunteers, and any other City of Colton affiliate. I further understand and acknowledge that I am giving up valuable legal rights on behalf of myself and I knowingly and voluntarily give up these rights of my own free will on behalf of myself by signing this Agreement.

Print Name	Signature	Date
<b>For Office Use Only</b>		
<b>Received By:</b>	<b>Approved By:</b>	<b>Date:</b>
<b>Communication NOTES:</b>		
<b>Gift Card Distributed:</b>		<b>Date/Staff:</b>