



**Town of Watertown**

**Snow Removal Program**

**2021-2022**

## **Watertown Recreation Department and Council on Aging/Senior Center Snow Removal Program 2021-2022 Season (for Eligible Residents)**

Hello, Watertown Seniors and Residents with Disabilities,

We hope all are well and you are enjoying the early winter season.

In coordination with the Watertown Middle School, Watertown High School, Recreation Department, Council on Aging/Senior Center, and the Marshall Home Fund, we are offering a snow-shoveling program specifically for our senior residents over age 60 and those who are disabled. Watertown Middle School and Watertown High School students are matched with senior residents in their neighborhood, and assigned to be responsible for shoveling snow from the sidewalks, steps and driveways for the duration of the winter season. This year, thanks to generous support from the Marshall Home Fund, students will have an opportunity to earn a stipend by assisting with snow shoveling in their neighborhood.

**Since this program depends heavily on student “volunteers”, we may not have enough students to cover all households. Therefore, we cannot guarantee that there will be a student match who will be able to service your home.**

We will try to accommodate everyone and we will inform you either way.

As the winter snow season begins, we want to reach out to confirm the following:

1. Would you like to participate in the program this year?
2. If yes, please complete the attached Application and Waiver (including a description of the areas of your property that you would like shoveled and prioritizing each separate area by importance) and mail to:

Watertown Recreation Department  
Snow Removal Program  
149 Main Street  
Watertown, MA 02472

Once we receive your information sheet and waiver, we will match the students shovelers by neighborhood and houses and confirm your assignment.

Additionally, please note the following about the way the program works:

- There is no guarantee that signing up will lead to services actually being rendered this winter season. The service depends on the number of students who sign up for the program and where those students reside in town (for safety, students shovelers are only given assignments close to where they reside). As such, if there are no students in your area or not enough students, we will not be able to provide services to everyone.
- Student(s) are assigned to the same house for the duration of the winter. They will be asked to shovel the same house after each storm.
- The student(s) do not check in when they arrive at the house. They are told to arrive, do the job and leave. They may not enter the homes and they may not accept anything from residents.

- Though good-natured, please do not give student(s) any additional tips or treats for their services. No food, drinks, or gifts of any kind. The students will earn a stipend provided and through a generous grant from the Marshall Home Fund and community service credits as a result of their efforts.
- When school is in session the day of a snowstorm, the students will shovel at their earliest convenience and have the discretion to shovel before or after school.
- The students use their best discretion when deciding how long after a snowfall to shovel.
- Should a student fail to fulfill their obligation after a snowfall, the student will be contacted to do so. If they should fail a second time, they shall be removed from the program. An effort will then be made to replace the student.
- Should a student be sick or on vacation or otherwise unable to shovel for a particular storm, they are instructed to inform the Recreation Department which will do its best to inform the resident of the student's absence.
- Please provide a description of your property and more specifically what you require to be shoveled. Also, please indicate which areas are more essential for shoveling services.
- Participation is contingent upon signing the program's waiver.
- The Town of Watertown reserves the right to cancel the snow removal program for a home, if at any time the Town of Watertown deems that the property is unsafe for the student to provide snow removal services.
- There is no cost for this program.

Please let us know at your earliest convenience whether you would like to participate this year and mail back the enclosed waiver. Also, feel free to send along any follow up questions. Thank you!

Kind regards,

Peter Centola  
Recreation Director

Anne-Marie Gagnon  
Council on Aging/Senior Center Director

**Watertown Recreation Department**  
149 Main Street - Watertown, MA 02472  
Phone 617-972-6494 • (F) 617-926-6129  
recreation@watertown-ma.gov • website: www.recreation.watertown-ma.gov

### Application for **Snow Removal Assistance Program**

**Who:** Watertown Seniors (60+) or Disabled Residents ONLY  
**When:** Winter of 2021-2022  
**Time:** Earliest convenience of the student assigned after a snowstorm  
**Where:** Watertown Community Neighborhoods  
**Fee:** None

**To Register Online:**

Go to our website at [www.recreation.watertown-ma.gov](http://www.recreation.watertown-ma.gov) and select “**Online Registration**”

**Description:** After a snowstorm and at their earliest convenience, students will remove snow from main entrances, sidewalks, walkways and driveways for Watertown residents who are in need of assistance due to age, disability or other health reasons. The objective is to clear snow so that people can get out of their houses, and clear sidewalks so that neighbors can travel safely. It also gives students an opportunity to develop strong community spirit and a sense of responsibility. All program participants are required to sign waivers which will allow the Town of Watertown to evaluate their addresses to confirm that the premises are safe for student shoveling.

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**Watertown Recreation Department**  
**Application for Snow Removal Assistance Program for Seniors**

Name: \_\_\_\_\_ Date of Birth \_\_\_\_\_

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

Daytime Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Email: \_\_\_\_\_

How would you like us to contact you? \_\_\_\_\_

Description of property and areas needing snow removal, in priority order:

\_\_\_\_\_  
\_\_\_\_\_

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

**Please return Application and Waiver to the Watertown Recreation Office.**

Please register your email on the “**Notify Me**” at our website [www.recreation.watertown-ma.gov](http://www.recreation.watertown-ma.gov) to receive future program information.

The Watertown Recreation Department has **Facebook, Twitter, Instagram and YouTube** pages. The Facebook address is WatertownRecreationDepartment and the Twitter address is @Watertownrec. The address for Instagram is watertownrecreation and YouTube is Watertown Recreation.

**Town of Watertown, Department of Recreation and Council on Aging/Senior Center**

SNOW REMOVAL PROGRAM WAIVER.  
RELEASE, HOLD HARMLESS AND INDEMNIFICATION AGREEMENT

In consideration of participation in the Town of Watertown’s Snow Removal Program, the undersigned hereby waives, releases, agrees not to sue, and holds harmless the Town of Watertown, its officers, agents, volunteers, and employees from all actions, causes of action, damages, claims or demands, known or unknown, which the undersigned, and their successors, heirs, executors, administrators, or assigns may have against the Town of Watertown, its officers, agents, employees, and volunteers for any harm, damages, or injury to myself or my property, or for my death, which may arise as a result of my participation in the Town of Watertown’s Snow Removal Program.

The undersigned individual shall save, defend, indemnify and hold the Town of Watertown, its volunteers, officers, boards, commissioners, employees, attorney, and agents harmless from any injury including, without limitation, personal injury, death, real or personal property damage, or direct or indirect economic injury, claim, demand, suit, judgment, execution, liability, debt, damages or penalty arising out of any such claims, resulting from, or alleged to arise out of, or result from, my participation in the Town of Watertown’s Snow Removal Program.

The undersigned has read this waiver, release, hold harmless and indemnification agreement and understands its terms. The undersigned executes this agreement voluntarily and with full knowledge of its significance.

In witness whereof, I have executed this waiver, release, and hold harmless agreement at Watertown, Massachusetts on the date written below.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
(Print name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Date)

## Town of Watertown, Department of Recreation and Council on Aging/Senior Center Snow Shoveling Information for Students.

Hello Middle School and High School Students and Parents,

First and foremost, thank you very much for your interest in helping our elderly and disabled residents by shoveling snow this winter. We want to send along this letter for additional information on the program and to set expectations for the students and parents.

Each year dozens of residents' struggle with snow removal. This can be due to age, disability or other health reasons. Watertown's aim is to help these residents by matching them with local students like you who will be assigned the job of shoveling the same resident's home for the duration of the winter. This helps both the resident maintain an active life and the neighborhood by keeping sidewalks usable for all.

The way the program will work:

- This year, thanks to a generous donation made by the Marshall Home Fund, students will have an opportunity to earn a stipend for their hard work. Students will receive a gift card of \$50.00 per season and community service credit through Watertown High School. If there is an exceptional amount of snow and funds allow, we will offer a second stipend of \$25.00 for extenuating circumstances.
- Students will be assigned a home (possibly with another student) near their own home and shall be responsible for shoveling that same property after each snowfall for the duration of the winter season.
- Students use their best judgment as to how long after the snowfall they shall conduct the shoveling, whether there is school or not. Please do your best to get there early, but school comes first.
- Students and their parents will be sent an email that contains their assignment and it will include the contact information for any other students who are assigned with them.
- **Parents and students need to reply to this initial email to confirm that they have received their assignment and understand their responsibilities this winter.**
- Parents and students should use this email to coordinate their times to shovel.
- Students are advised not to check in with the house. **STUDENTS SHALL NOT ENTER THE HOMES OF ANY RESIDENTS THEY ARE SHOVELING AT ANY TIME.** Do not accept anything from residents.
- If you are unable to shovel, for example due to sickness or vacation, please contact the Recreation Department and the other students in your group.
- Students who do not already have a shovel will be provided one upon request.
- Participation is contingent upon signing the program's waiver.

Residents will also be informed not to invite students inside their homes, but it is worth mentioning a second time here that the job is just to shovel and no entrance into the homes is allowed. There is no need to check in with the residents. Please respectfully refuse if residents extend any other invitations.

The primary mode of communication for the program will be via email so please let me know if this is not the best way to be in contact with you or if there is an additional email address you would like me to add. Finally, if you need a shovel, please contact me as soon as possible and one will be provided for you.

We look forward to working with you this winter season and I will be in touch individually with more specific details. Feel free to contact us at any time with any questions and thank you again for helping our Watertown neighbors.

Sincerely,

Kind regards,

Peter Centola  
Recreation Director

Anne-Marie Gagnon  
Council on Aging/Senior Center Director



TOWN OF WATERTOWN  
RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT WITH  
PARENTAL CONSENT (“AGREEMENT”)

IN CONSIDERATION of being permitted to participate in any way in the volunteer Snow Shoveling Program (“Activity”) at any time during the current year (school year 2021-2022) I, for myself, my personal representatives, successors, assigns, heirs, and next of kin:

1. ACKNOWLEDGE, agree, and represent that I understand the nature of the Activity and that I am qualified, in good health, and in proper physical condition to participate in such Activity. I further agree and warrant that if, at any time, I believe the conditions to be unsafe, I will immediately discontinue further participation in the Activity.

**2. FULLY UNDERSTAND that: (a) THIS ACTIVITY INVOLVES INHERENT RISKS AND DANGERS OF SERIOUS BODILY INJURY, INCLUDING PERMANENT DISABILITY, PARALYSIS, AND DEATH (“Risks”);** (b) these Risks and dangers may be caused by my own actions or inactions, the actions or inactions of others participating in the Activity, the conditions in which the Activity takes place, or the actions or inactions of the “RELEASEES” named below; (c) there may be OTHER RISKS or SOCIAL AND ECONOMIC LOSSES either not known to me or not readily foreseeable at this time; and I FULLY ACCEPT AND ASSUME ALL SUCH RISKS AND ALL RESPONSIBILITY FOR LOSSES, COSTS, AND DAMAGES I incur as a result of my participation, or that of the minor, in the Activity.

3. HEREBY RELEASE, DISCHARGE, AND COVENANT NOT TO SUE the sanctioning organization(s), including the Town of Watertown, the Watertown School Department. The Watertown Recreation Department, their administrators, directors, agents, officers, members, volunteers, and employees, other participants, officials, rescue personnel, sponsors, advertisers, owners and lessees of Premises on which the Activity is conducted, (each of the forgoing shall be considered one of the RELEASEES herein) FROM ALL LIABILITY, CLAIMS, DEMANDS, LOSSES, OR DAMAGES ON ANY ACCOUNT CAUSED, OR ALLEGED TO BE CAUSED, IN WHOLE OR IN PART BY THE ACTIONS, OMISSIONS, OR NEGLIGENCE OF THE RELEASEES OR OTHERWISE, INCLUDING RESCUE OPERATIONS; AND I FURTHER AGREE that if, despite this RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT I, or anyone on my behalf, makes a claim against any of the RELEASEES, I WILL INDEMNIFY, SAVE, AND HOLD HARMLESS EACH OF THE RELEASEES from any litigation expenses, attorney fees, loss, liability, damage, or cost which may be incurred as the result of such claim.

I ACKNOWLEDGE THAT I HAVE READ THIS AGREEMENT AND FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, HAVE SIGNED IT FREELY AND WITHOUT ANY INDUCEMENT OR ASSURANCE OF ANY NATURE, AND I INTEND IT TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW AND AGREE THAT IF ANY PORTION OF THIS AGREEMENT IS HELD TO BE INVALID, THE BALANCE, NOTWITHSTANDING, SHALL CONTINUE IN FULL FORCE AND EFFECT.

PRINTED NAME OF STUDENT PARTICIPANT: \_\_\_\_\_

PARTICIPANT'S SIGNATURE: \_\_\_\_\_

ADDRESS: (Street) (City) \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_

DATE: \_\_\_\_\_

AND I, THE MINOR'S PARENT AND/OR LEGAL GUARDIAN, UNDERSTAND THE NATURE OF THE ACTIVITY AND THE MINOR'S EXPERIENCE AND CAPABILITIES AND BELIEVE THE MINOR TO BE QUALIFIED, IN GOOD HEALTH, AND IN PROPER PHYSICAL CONDITION TO PARTICIPATE IN SUCH ACTIVITY. I HEREBY RELEASE, DISCHARGE, COVENANT NOT TO SUE, AND AGREE TO INDEMNIFY AND SAVE AND HOLD HARMLESS EACH OF THE RELEASEES FROM ALL LIABILITY, CLAIMS, DEMANDS, LOSSES, OR DAMAGES ON THE MINOR'S ACCOUNT CAUSED, OR ALLEGED TO BE CAUSED, IN WHOLE OR IN PART BY THE ACTIONS, OMISSIONS, OR NEGLIGENCE OF THE "RELEASEES" OR OTHERWISE, INCLUDING RESCUE OPERATIONS AND FURTHER AGREE THAT IF, DESPITE THIS RELEASE, I, THE MINOR, OR ANYONE ON THE MINOR'S BEHALF MAKES A CLAIM AGAINST ANY OF THE RELEASEES NAMED ABOVE, I WILL INDEMNIFY, SAVE, AND HOLD HARMLESS EACH OF THE RELEASEES FROM ANY LITIGATION EXPENSES, ATTORNEY FEES, LOSS LIABILITY, DAMAGE, OR ANY COST THAT MAY OCCUR AS A RESULT OF ANY SUCH CLAIM.

PRINTED NAME OF PARENT/GUARDIAN: \_\_\_\_\_

PARENT/GUARDIAN'S SIGNATURE: \_\_\_\_\_

ADDRESS: (Street) (City)- \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_

DATE: \_\_\_\_\_

A SPECIAL THANKS TO THE **MARSHALL HOME FUND** WHOSE GENEROUS DONATION THIS YEAR HAS MADE IT POSSIBLE TO FUND THE PROGRAM AND CONTINUE THEIR OUTSTANDING SERVICE TO THE 55+ COMMUNITY OF WATERTOWN.