



## September 17 and 18, 2010 2010 Volunteer Application Form

### **Personal Information:**

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

Address: \_\_\_\_\_ City/Town: \_\_\_\_\_

Province: Ontario Postal Code: \_\_\_\_\_

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

Daytime Telephone: \_\_\_\_\_ Evening Telephone: \_\_\_\_\_

**Volunteers under the age of the 13 years must be accompanied by an adult and both parties must complete this form.**

Age:  under 13       14-18       19-25  
 26-35       35 +

Is this for Community Service hours? (Please circle)      Yes      No

School: \_\_\_\_\_ Grade: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Relationship: \_\_\_\_\_

Emergency Contact Phone: \_\_\_\_\_

Special Needs/Meds: \_\_\_\_\_

**Please specify :( i.e. No heavy lifting, no stairs, heart condition, back problems etc.)**

Smart Serve Trained \_\_\_\_\_ Cash Handling Experience \_\_\_\_\_  
Interested in Set Up/Take Down \_\_\_\_\_ Heavy Lifting Involved \_\_\_\_\_

Other: \_\_\_\_\_

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Please fax to Tammy Tinney at Information Orillia, fax number 705-326-6064 or email at [volunteer@informationorillia.org](mailto:volunteer@informationorillia.org).

**WAIVER OF LIABILITY AND HOLD HARMLESS AGREEMENT**

In consideration for receiving permission to volunteer for the Orillia Beatles Celebration and the Orillia Festivals Committee I hereby RELEASE, WAIVE, DISCHARGE AND COVENANT NOT TO SUE the Orillia Beatles Celebration or the Orillia Festivals Committee its officers, agents, directors, servants or employees (hereinafter referred to as RELEASEES) from any and all liability, claims, demands, actions and causes of action whatsoever arising out of or related to any loss, damage or injury, including death, that may be sustained by me, or any of the property belonging to me, WHETHER CAUSED BY THE NEGLIGENCE OF THE RELEASEES, or otherwise, while participating in such activity or while in, on or upon the premises where the activity is being conducted.

I further hereby AGREE TO INDEMNIFY AND HOLD HARMLESS the RELEASEES from any loss, liability, damage or costs, that they may incur due to my participation in said activity, WHETHER CAUSED BY THE NEGLIGENCE OF RELEASEES or otherwise.

It is my express intent that this Waiver of Liability and Hold Harmless Agreement shall bind the members of my family and spouse, if I am alive, and my heirs, assigns and personal representative, if I am deceased, and shall be deemed as a RELEASE, WAIVER, DISCHARGE AND COVENANT NOT TO SUE the above-named RELEASEES.

IN SIGNING THIS RELEASE, I ACKNOWLEDGE AND REPRESENT THAT I have read the foregoing Waiver of Liability and Hold Harmless Agreement, understand it and sign it apart from the foregoing written agreement, have been made; I am at least eighteen (18) years of age and fully competent; and I execute this Release for full, adequate and complete consideration fully intending to be bound by same.

Signed on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_.

**VOLUNTEER**

\_\_\_\_\_  
**Printed Name**

\_\_\_\_\_  
**Signature**

**If Volunteer is under the age of 18, Parent/Guardian consents to the minor's participation in the event.**

\_\_\_\_\_  
**Parent/Guardian Signature**

\_\_\_\_\_  
**Date**