



August 26 & 27, 2011

Volunteer Application

Last Name: _____ First Name: _____

Email Address: _____

Street Address: _____

City/State/Zip: _____

Home Phone: _____ Work Phone: _____ Cell: _____

T-Shirt Size S M L XL 2XL

Age Group 16 TO 18 18 TO 20 21 TO 40 40+

If under the age 16, please complete **Parental Consent Form** and provide your age here _____

Have you worked the Metro Cruise before? Yes No

If yes, what positions have you worked? _____

Position Required Security Support Set Up Any

Dates Available Thurs Fri Sat Any

Shifts Available (4 hrs.) Morning Afternoon Evening All

I am available for multiple shifts and dates. Yes No

Please list any factors (sun exposure, lifting, walking, etc) that may prevent you from performing a designated task.

I hereby **RELEASE** and **DISCHARGE** the Metro Cruise, the Metro Cruise Committee, the Wyoming-Kentwood Area Chamber of Commerce, the City of Wyoming, the City of Kentwood and Kent County, their officers, directors, trustees, agents, representatives employees, members, managers, and volunteers or any other individuals involved in the 2011 Metro Cruise from any and all claims, damages, rights of action, or causes of action and/or any liability whatsoever, present or future, whether the same be known or unknown, anticipated or unanticipated, arising out of any accident, injury (physical or mental), sickness (physical or mental), death, damage or loss which may be sustained by me which arises out of my participation as a volunteer for Metro Cruise. I also hereby agree to indemnify and hold harmless any of the above-named entities and/or individuals from all claims, liabilities, losses, damages and expenses as incurred (including all attorney fees and court costs) relating to or arising out of the Metro Cruise event. Furthermore, I hereby **WAIVE** any and all liability against the Metro Cruise, the Metro Cruise Committee, the Wyoming-Kentwood Area Chamber of Commerce, the City of Wyoming, the City of Kentwood and Kent County, their officers, directors, trustees, agents, representatives, employees, members, managers, and volunteers or any other individuals involved in the 2011 Metro Cruise.

I understand THAT IF ANY INFORMATION PROVIDED IS FALSE, if I do not show up for my shifts, or if I show up for my shifts under the influence of drugs or alcohol, this will result in my immediate dismissal. I understand that any violations of the Rules of Conduct/Code of Ethics in the Volunteer Handbook could also result in my immediate dismissal as well and that any dismissal would affect the possibility of returning as a volunteer in the future.

In signing this Agreement, I hereby acknowledge and represent that I have read and understand this Agreement in its entirety, and that I sign this Agreement voluntarily as my own free act and deed. I am of lawful age and legally competent to enter into this Agreement.

Signature: _____ Date: _____

NOTE: We require that you provide 2 emergency contacts.

Name: _____ Relationship: _____

Home Phone: _____ Work Phone: _____ Cell: _____

Name: _____ Relationship: _____

Home Phone: _____ Work Phone: _____ Cell: _____

Return this form to:
Wyoming-Kentwood Area
Chamber of Commerce
921 47th St SW
Wyoming MI 49509
Fax: 616-531-0252
Email: sue@southkent.org