



GREATER VERNON DRAGON BOAT RACE & FESTIVAL

KAL BEACH, KALAMALKA LAKE, COLDSTREAM (VERNON), BC

WWW.VERNONDRAGONBOAT.COM

VOLUNTEER APPLICATION FORM

NAME _____

ADDRESS _____

CITY _____

PROVINCE _____

POSTAL CODE _____

PHONE _____

WORK _____

CELL _____

EMAIL _____

EMERGENCY CONTACT INFORMATION

NAME _____

PHONE _____

CELL _____

OPTIONAL

PLEASE LIST ANY MEDICAL CONDITIONS WE SHOULD BE AWARE OF

GENDER MALE FEMALE

AGE 15-18 18-39 40-65 65+

VERNON DRAGON BOAT RACE & FESTIVAL LTD. (VDBRF) REQUIRES YOUR AGREEMENT ON:

- I UNDERSTAND THAT I AM REPRESENTING THE VDBRF DURING MY TIME VOLUNTEERING AND AGREE TO ACT IN A PROFESSIONAL MANNER AT ALL TIMES
- I GRANT PERMISSION FOR THE VDBRF TO USE MY NAME, PHOTO OR VIDEO IMAGE OF ME, AND ANY COMMENTS MADE BY ME IN WRITING OR OTHERWISE FOR PROMOTIONAL PURPOSES IN ANY FORM OF MEDIA
- I UNDERSTAND THAT I CANNOT GIVE MEDICAL ADVICE. IF SOMEONE IS SEEKING MEDICAL INFORMATION I WILL DIRECT HIM OR HER TO A MEDICAL PROFESSIONAL
- I HEREBY RELEASE, HOLD-HARMLESS AND WAIVE ALL CLAIMS WHICH MAY ARISE FROM ANY CLAIM OR ACTION THAT I MAY HAVE AGAINST VERNON DRAGON BOAT RACE & FESTIVAL LTD. (VDBRF), ITS EMPLOYEES, OFFICERS, DIRECTORS, AGENTS, VOLUNTEERS AND MEMBERS WITH RESPECT TO THE USE OF ANY OF THE ABOVE OR MY PARTICIPATION IN ANY RELATED VDBRF ACTIVITIES WHILE VOLUNTEERING FOR THE VDBRF

SIGNATURE

(PARENT/GUARDIAN IF VOLUNTEER IS UNDER 18 YEARS OF AGE)

DATE

**PLEASE RETURN YOUR COMPLETED FORM BY FAX TO (403) 936-8473 OR E-MAIL
LSEITZ@ABNET.CA.**