

VANCOUVER ISLAND MUSICFEST

2012 Youth Volunteer Waiver

I have read and understood the volunteer roles and responsibilities for Vancouver Island MusicFest and I know that if I do not fulfill my responsibilities in any manner, I can lose my benefits immediately and be removed from the Vancouver Island MusicFest Grounds. I accept my responsibilities and will sign the liability waiver below.

Signature

Printed Name

_____, 2012
Dated

Name of Crew you have applied for

I, _____ (print name) am the parent/guardian of the above
named person who is ____ years of age. I have read and understand the roles and
responsibilities of VIMF Volunteers and trust that the above named person also has read and
understands them. I give my permission for that person to volunteer at Vancouver Island
MusicFest.

_____, 2012
Dated

LIABILITY WAIVER

I wish to be a volunteer at Vancouver Island MusicFest. I understand that this is a day and nighttime outdoor event with many people in attendance. I also understand that the ground and lighting are uneven; there are many people, temporary facilities and stationary and moving equipment on the grounds as well as many other potential hazards. In further consideration of the benefits given to me as a volunteer at Vancouver Island MusicFest, I agree that the Comox Valley Folk Society, its directors, employees, contractors, guests and fellow volunteers are not responsible, and are released from any claim that I might have, for any loss, damage, harm, injury, cost or expense that I might suffer or incur before, during or after the event, at the grounds of Vancouver Island MusicFest or otherwise in the furtherance of my duties as a volunteer, except in the case of gross or wilful negligence on the part of the Society or such persons. I accept the responsibility for my own safety and security and make this waiver on behalf of myself and my legal representatives, successors and assigns.

Volunteer Signature:

_____, 2012
Date

I _____ (print name) am the parent/guardian of the above named
person. I have read and understand the above waiver of liability and accept it on behalf of the named
person.

_____, dated: _____, 2012
Sign name:

Please fax this form to or hand deliver to: 250-338-6510 or hand deliver to our new office at 2760 C Moray Ave.