



## Youth Volunteer Application Form

Please Note: Your parent or guardian also has to sign this form

Name: \_\_\_\_\_

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

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Are you a returning Volunteer? Yes or No

If returning, what crew were you on? \_\_\_\_\_

Occupation \_\_\_\_\_

Languages: \_\_\_\_\_

Job/Volunteer Experience: \_\_\_\_\_

Interests: \_\_\_\_\_ Drivers License: Yes No

Skills, Memberships, Professional Associations (first aid, job-related skills, technological, etc.) \_\_\_\_\_

\_\_\_\_\_

Crew Preference or area of interest (list at least 2 areas or crews that you would be interested in volunteering.) *See online version for list of crews looking for volunteers*

1. \_\_\_\_\_

2. \_\_\_\_\_

Do you have any medical/physical restrictions we should consider when assigning your duties?

\_\_\_\_\_

\_\_\_\_\_

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

Two references (current volunteer or staff if possible or other personal or professional references):

\_\_\_\_\_

\_\_\_\_\_

**Privacy Policy:** We are committed to protecting the privacy of this information. It is not sold, loaned to or exchanged with other organizations. The information provided is used to determine which crew you will be best suited to. Your contact information will be passed on to the crew coordinators you will be working with.

I have read and understood all of the above. I know that if I do not fulfill my responsibilities in any manner, I can lose my benefits immediately and be removed from the MUSICFEST grounds. I accept my responsibilities and will sign the liability waiver below.

\_\_\_\_\_  
Signature

\_\_\_\_\_, 2010

Dated

I, \_\_\_\_\_ (print name) am the parent/guardian of the above named person who is \_\_\_\_ years of age. I have read and understand all of the above and have ensured that the above named person also has read and understands it. I give my permission for that person to volunteer at MUSICFEST.

\_\_\_\_\_, 2010

Dated

#### **LIABILITY WAIVER**

I wish to be a volunteer at 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 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 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.

\_\_\_\_\_ dated: \_\_\_\_\_, 2010

Sign name:

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: \_\_\_\_\_, 2010

Sign name:

Please hand deliver the completed form to our office at the Comox Valley Centre for the Arts below the Comox Valley Art Gallery, 830 Duncan Ave, Courtenay. Our entrance is off of 6<sup>th</sup> Street. Phone for office hours 250.871.8463.