



Volunteer Information Form
Annual Food, Wine & Brew Festival

Name: _____ Home # _____

Address: _____ Work # _____

City: _____ State: _____ Zip code: _____

Email: _____ Date of Birth: _____

Driver's License #: _____ State: _____ Gender: M F

T-Shirt Size _____

In Case of Emergency:

Name: _____ Phone: _____ Relationship: _____

1.) The event set up is over two days; please tell us what days and time works best for you.

Friday, September 7, 2018 _____

Saturday, September 8, 2018 _____

2.) Do you need volunteer hours for an organization/school?

3.) **RELATED EXPERIENCE:** Please list in chronological order, beginning with the most recent, your educational, professional and relevant experiences to include: degrees, certificates, licenses, organizations and/or affiliations.

4.) **WEB MEMBERSHIPS:** Please list and all, current personal or business websites, web pages or memberships on any Internet-based chat room, social clubs or forums, to include, but not limited to: Facebook, Blogs, Yahoo, YouTube, etc.

Website/Domain

Screen Name

5.) **Have you ever been convicted, plead guilty or no contest, or received deferred adjudication before? Yes _____ No _____**

If Yes, Please Explain: _____

6.) **Do you currently have any criminal charges pending? Yes, _____ No _____ If Yes, Please Explain _____**

(You may omit convictions for minor traffic violations unless the position for which you are applying requires the operation of a motor vehicle. Conviction will not result in automatic disqualification. The seriousness of the crime, date of conviction, and the relevance of the crime to this position will be considered prior to participation in the Harker Heights Chamber of Commerce.)

As a Volunteer, I agree:

1. To accept the guidance and decisions of the staff.
2. To observe all staff rules and HHCOOC policies and procedures.
3. To recognize the function of paid staff, maintain smooth working relationships and stay within the bounds of volunteer responsibilities.
4. To complete assignments to the best of my ability.
5. To wear appropriate uniform as guided by volunteer coordinator. This may include name badges, specific attire, costume, etc.
6. To report on time as scheduled and check in with volunteer coordinator upon arrival to work.
7. To sign in and out, ensuring that my volunteer time has been verified and accounted for.
8. To inform the volunteer coordinator as soon as possible if unable to keep agreed schedule.
9. To act courteously to patrons and employees, positively representing the Harker Heights Chamber of Commerce
10. To maintain the dignity and integrity of HHCOOC with the public and patron confidentiality.
11. I understand that a volunteer is an at-will employee and may be terminated at any time if it is determined to be in the best interest of the Chamber, or if there is a violation of the agreement.

Volunteer Printed Name: _____ Date: _____

Volunteer Signature: _____

Parent/Guardian Printed Name: _____

Parent/Guardian Signature (if under 17): _____

OTHER DOCUMENTS REQUIRED:

- If the volunteer is between the ages of **10 years and 16 years**
 - Photo ID of parent/guardian and child volunteering: (we need one [1] of the acceptable forms)
 - Driver's License
 - Student ID
 - Military ID
- If the volunteer is **17 years and older**
 - Photo ID required: (we need one [1] of the acceptable forms)
 - Driver's License
 - Student ID
 - Military ID
- A Chamber Staff member must make the color photo copy of all required Photo IDs.
Electronic copies will not be accepted.

Harker Heights Chamber of Commerce
Volunteer Release Form
Waiver, Release of all liability and Assignment of Claims

1. I hereby acknowledge and agree that participation/volunteering with the **Harker Heights Chamber of Commerce** may have inherent risks, even when the greatest care is taken. The risks include, but are not limited to, those caused by terrain, facilities, temperature, weather, actions of other people including, but not limited to organizers, participants, volunteers, spectators, agents, and **Harker Heights Chamber of Commerce** and its officers, directors, and employees. I hereby assume all the risks of participating, and volunteering in this event to include the risks of bodily injury, death, or property damage resulting from participation in this event. I further acknowledge and agree that the above list does not include all possible risks associated with participation in the event, and that the above list in no way limits the extent or reach of this **RELEASE OF LIABILITY, EXPRESS ASSUMPTION OF RISK AND HOLD HARMLESS AGREEMENT**.
2. I certify that I am physically fit with no known physical or mental impairment that would affect my participation or volunteering in the event. I acknowledge that this Accident Waiver and Release of Liability form will be used by the event sponsors and organizers of the event in which I may participate or volunteer and that it will govern my actions and responsibilities at said event. I certify that I am not under the influence of any narcotic, alcohol or other drug that may impair my understanding or judgement of this waiver. I certify that I am 18 years and otherwise legally competent to sign this release of liability and hold harmless agreement.
3. In consideration of my being permitted to participate/volunteer with the **Harker Heights Chamber of Commerce**, I hereby take action for myself, my executors, administrators, heirs, next of kin, successors, and assigns as follows: (A) Waive, Release and Discharge from any and all liability for my death, disability, personal injury, property damage, property theft or actions of any kind which may hereafter accrue to me during the event or during my traveling to and from this event, **THE FOLLOWING ENTITIES OR PERSONS: The Harker Heights Chamber of Commerce**, its officers, directors, employees, sponsors, representative, agents, volunteers and (B) indemnify and Hold Harmless the entities or person mentioned in this paragraph from all liabilities or claims made by other individuals or entities because of any of my actions during this event. Accordingly, I do hereby release and discharge the **Harker Heights Chamber of Commerce**, its directors, employees, sponsors, representatives, agents, and volunteers from all claims, demands, and cause of actions of every kind whatsoever for any death, damages and/or injuries which may result from my participation in this event. This shall be construed broadly to provide a release and waiver to the maximum extent permissible under applicable law.

4. I hereby consent to receive medical treatment, which may be deemed advisable in the event of injury, accident and or illnesses during the event(s). I agree to pay for all costs related to medical response, treatment and transport on my behalf.

I hereby certify that I have read this Waiver, Release, Hold Harmless and Assignment of Claims in its entirety and I understand that the terms of this document are legally binding. My signature below indicates that I fully understand it and agree to its contents of my own free will.

Participant's Signature

Date

Parent/Guardian's Signature (if volunteer is a minor)

Date