



South Sound Center Independence Day Celebration Event Volunteer Application Form

Please print and complete form and mail, email or fax to: Sandy Caron

Capital Development Company
PO Box 3487
Lacey, WA 98509
Fax: (360) 459-8747
Email: SandyC@capdevco.com

Today's Date: _____

Name: _____ Nickname (if desired): _____

Address: _____

City: _____ State: _____ Zip Code: _____

Preferred Phone Number: _____ Email: _____

Note: Primary contact will be with email.

Are you at least 16 years of age? _____ *Volunteers must be at least 16 years of age to participate.*

Will you be volunteering to fulfill a service requirement? _____

If so, for what group/organization? _____ Hours required? _____

In Case Of Emergency or Illness Please Notify:

Name: _____ Relationship: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone (Home and Cell) Number: _____

Please describe any medical condition/allergies that we may need to be aware of:

Yes, I would like additional information on volunteer opportunities at Capital Development Company/South Sound Center. (Contact will be by email.)

Duties of Volunteer:

Your participation as a volunteer will include, but not be limited to, the following:

Monitoring/directing incoming and outgoing traffic, trash detail before, during and after event, helping post signs or take signs down, cleanup of safety cones, etc. Please wear good walking shoes and comfortable clean clothes. (Nice jeans or shorts and a nice t-shirt or blouse is appropriate. Please no baggy, torn, or offensive jeans, shorts and t-shirts.)

What time are you available to volunteer: _____

The event is from 6pm to 11pm but volunteers are needed before and after the event for set up and clean up.

Please read the following agreement and sign below:

Waiver, Hold Harmless, and Indemnity

In connection with my voluntary involvement (without compensation) in activities undertaken for, and with the participation and support of South Sound Center and Capital Development Company, including their tenants, employees, agents and other volunteers and event contributors, I hereby agree, for myself, my heirs, assigns, executors, and administrators to release and discharge South Sound Center and Capital Development Company, including their tenants, employees, agents and other volunteers and event contributors from all claims, demands and actions for injuries sustained to my person and/or property as a result of my involvement in such activities, whether or not resulting from negligence, and I agree to release and hold South Sound Center and Capital Development Company, including their tenants, employees, agents and other volunteers and event contributors harmless from any cause of action, claim, or suit arising there from. I hereby attest that my attendance and involvement in such activities is voluntary, that I am participating at my own risk, and that I have read the foregoing terms and conditions of this release.

Photo Release

I agree that South Sound Center and its tenants, including Capital Development Company may use my likeness in any publications, promotional materials and exhibits that will be used to promote the events of the center.

Note: If the volunteer is under 18 years of age, a parent or the guardian of the volunteer must sign this application on behalf of the volunteer, agreeing to the terms and conditions of this agreement.

Volunteer Signature Date

Parent/Guardian Signature (required if less than 18 years of age) Date

Print Parent/Guardian Name