

5K Run for The Bridge

Saturday, April 23, 2016



THE BRIDGE OF GEORGIA

Volunteer Application

PERSONAL AND CONFIDENTIAL

Name: _____

Nickname: _____ SSN: _____

Driver's License number and state: _____

Date of Birth (MM/DD/YYYY): _____

Current Address: _____

Please check the number and/or E-Mail address that is the best way to contact you.

Home Phone: _____

Work Phone: _____

Cell Phone: _____

Primary E-Mail Address: _____

Do you have any allergies, medical conditions, or medications that we would need to know about in case of a medical emergency? Yes No If yes, please note here: _____

Do you have specific skills or experience that you would like to use to benefit the children of The Bridge?

If so, list here: _____

Preferred assignments - Volunteers needed:

_____ Man water stations

_____ Man snack stations

_____ Registration

_____ Guides to direct runners at turns

_____ Put out signs

_____ Parking

_____ Manage Vendors

_____ Set up

_____ Tear down and clean up

_____ Volunteer director

_____ Available anywhere needed

Are you the parent/legal guardian of a student enrolled at The Bridge of Georgia? Yes No

Have you ever been convicted of a crime? Yes No

Have you ever been convicted of a felony involving the use, possession, or selling of illegal drugs/alcohol? Yes No

Have you volunteered at other organizations before? If so, please list and describe the kind of volunteer work you did for that organization. _____

Emergency Contact _____ Phone _____

Photo Release

I agree to grant to The Bridge of Georgia and its authorized representatives permission to record on photography film and/or video, pictures of my participation. I further agree that any or all of the material photographed may be used, in any form, as part of any future publications, brochure, or other printed materials used to promote The Bridge of Georgia, and further that such use shall be without payment of fees, royalties, special credit or other compensation.

To the best of my knowledge, all answers are true and I have not withheld any pertinent information.

By signing this application and photo release you agree to all the above.

Signature _____ Date _____