



2020 HARBOR DAYS VOLUNTEER REGISTRATION

Name: _____

Mailing Address: _____

Phone: _____

E-mail: _____

Emergency Contact: _____ **Phone:** _____

T-shirt Size: _____

Volunteer Opportunities (please call for specific times or refer to Sign Up Genius)

- **Logistics/Security:** Thurs. Aug 6 _____ (time), Fri. Aug 7 _____ (time), Sat. Aug 8 _____ (time)
- **Information Booth:** Thurs. Aug 6 _____ (time), Fri. Aug 7 _____ (time), Sat. Aug 8 _____ (time)
- **Community Dinner Hospitality:** Thur. Aug 6 _____ (time 3 - 7:30 pm)
- **Car Show Check-in:** Thurs. Aug 6 _____ (time 4 - 8 pm)
- **Craft Show Hospitality:** Fri. Aug 7 _____ (time 9 am & 2 pm)
- **Kids Day Games Assistants:** Fri. Aug 7 _____ (time 10 am - 3 pm)
- **Assist with Euchre Tournament:** Fri. Aug 7 _____ (time 4 - 6pm)
- **Building Block Contest Assistants:** Sat. Aug 8 _____ (time 8:30 - 11:30 am)
- **Banner Carrier Parade:** Sat. Aug 8 _____ (time 11 am)
- **Assist with Paddle Harbor Days:** Sat. Aug 8 _____ (time 2 - 5 pm)
- **Assist with Cornhole Tournament:** Sat. Aug 8 _____ (4 - 9 pm)
- **Harbor Days Cleanup:** Sun. Aug 9 - Volunteers will meet at 9 am for breakfast and assignments

WAIVER OF LIABILITY AND HOLD HARMLESS AGREEMENT

For valuable consideration, receipt of which is hereby acknowledged, I hereby RELEASE, WAIVE, DISCHARGE AND COVENANT NOT TO SUE and further AGREE TO INDEMNIFY AND HOLD HARMLESS, Elk Rapids Harbor Days Association, Elk Rapids Area Chamber of Commerce, the Village or Township of Elk Rapids and its' affiliates, event sponsors, event charities and their workers, employees and directors (hereinafter referred to as Releasees) from any and all liability, claims, costs, expenses, attorney fees, demands, actions or causes of action whatsoever arising out of or related to any loss, damage, or injury, including death, that may be sustained by me, or any of the property belonging to me, whether caused by the negligence of the Releasees or otherwise. I am 18 years of age or older. I agree that at no time during my shift shall I consume alcohol or drugs.

Signature: _____

Note: Parent/Guardian signature required if volunteer is a minor

Please return to Elk Rapids Harbor Days Association P.O. Box 801 Elk Rapids, MI 49629 or email to exdir@elkrapidsharbordays.org

Questions? Email: exdir@elkrapidsharbordays.org or call (231) 342-1058