



2014 VOLUNTEER APPLICATION

ALL VOLUNTEERS MUST BE AT LEAST 16 YEARS OF AGE

First Name: _____ Last: _____

Please Indicate Home Work Address: _____

City: _____ State: _____ Zip: _____

Date of Birth: _____ Gender: Male Female

Daytime Phone: _____ Evening Phone: _____

Cell Phone: _____ E-Mail Address: _____

Emergency Contact (name & phone #): _____

Are there any factors limiting you from certain tasks?: _____

Group/Affiliation/School _____ Age _____

Are you a member of a running club or organization? Y / N If so, which one? _____

Volunteer T-shirt: select one size Small Medium Large X-Large XX-Large

**SELECT YOUR CHOICES IN ORDER OF PRIORITY BY WRITING THE NUMBERS, 1,2,3 ETC. IN THE BOXES.
WE CANNOT GUARANTEE A FIRST CHOICE ASSIGNMENT. YOU WILL BE CONTACTED AT A LATER DATE WITH
YOUR ASSIGNMENT, INFORMATION AND TIME TO REPORT.**

___ Operations

___ Registration

___ Runner's Packet Pick-up

___ Runners' Food

___ Start/Finish Areas

___ Security/Crowd Control

___ Silent Auction

___ Family Food

Do you need a community service form? _____

Please sign the waiver below and mail or fax this form to:

FAPAPBC - 4100 Okeechobee Blvd, West Palm Beach, FL 33409 - FAX 561.352.2544

Volunteer's Agreement, Waiver, Release and Acknowledgement:

In consideration of your accepting me as a volunteer for Foster & Adoptive Parent Association of Palm Beach County (FAPAPBC), I hereby for myself, my heirs, executors and administrators waive and release any and all rights and claims for damages I may have against FAPAPBC, the sponsors, the volunteers, the participants, the State of Florida, and the cities and towns in which the race is contested, their representatives, successors and assigns for any and all injuries suffered by me in said event. I grant to FAPAPBC and FAPAPBC sponsors and licensees the exclusive right to the free use of my name, my voice and/or my picture in any broadcast, telecast, advertising, promotion or other account of this event. I further attest and certify that I am physically fit.

Date

Signature (Parent or Guardian if under 18)
Acknowledging Waiver Liability

Print Name