



Volunteer at The Meadow Event Park Application

Please tell us about yourself. (PLEASE PRINT, using a pen.)

Name: _____ Date of Birth _____

Mailing Address: _____

City/State/Zip Code: _____

Home Phone: _____ Cell Phone: _____

E-mail address: _____ T shirt size (adult) _____

Do you have any physical limitations? (Please check one.) Yes ___ No ___

Please state condition so assignments are made appropriately: _____

In case of an EMERGENCY, please contact:

Name _____ Relationship _____

Emergency Phone: Home _____ Cell _____

Application Type please check **one** of the following which best describes you

- | | |
|---|---|
| <input type="radio"/> High School Student | <input type="radio"/> Retired Adult |
| <input type="radio"/> College Student for service hours | <input type="radio"/> Working Adult |
| <input type="radio"/> Court ordered | <input type="radio"/> Business/Corporate Group member |

High School Students under the age of 18 years old must have parental permission completed.

Have you ever been convicted of a felony? (Please check one.) Yes ___ No ___

Do you consent to our organization running a background check on you? (Please check one.)
Yes ___ No ___

Please list other volunteer efforts in which you have participated:

Preferred shift (Please circle all that apply): ___Morning ___Afternoon ___Evening

Position Please check **one** of the following:

___Event Crew (30 volunteers per day)

___Pit Crew Assistance (5-7 dedicated volunteers for set-up and take-down)

___Kid's Firefighter Challenge (3 volunteers)

*Please review the document with the descriptions of the volunteer assignments to determine which position is best for you.

Thank you for your answers. All information is considered confidential.

The statements made by me in this application are true and complete to the best of my knowledge. I understand that any willful misstatements or omissions on this application will be considered sufficient cause to disqualify me for the volunteer opportunities at The Meadow Event Park.

Release Clause: If and when I am a participant in The Meadow Event Park Volunteer Program, I agree to assume full responsibility for such participation and release The Meadow Event Park from any damages which I may sustain thereby. I fully understand that if my services are no longer needed, or my performance is not acceptable, The Meadow Event Park has the right to terminate my services as required and without notice. Any property in my possession (keys, name badge, etc.) shall be returned to The Meadow Event Park upon termination of this agreement.

Volunteer Signature _____ Date _____

If volunteer is under 18 years old, a parent or guardian must sign below:

Parent/guardian Name (print) _____ Phone _____

Signature _____ Date _____

When completed, please send this form to: The Meadow Event Park, c/o Kaki Upshaw, 13191 Dawn Blvd, Doswell, VA 23047 or Fax to: 804-994-2927 or email to: volunteer@medoweventpark.com