



## 2017 Volunteer Information

Name: \_\_\_\_\_

Last

First

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Best Way to Contact Me:                      Phone Call                      Text                      E-Mail

**How Can I Help? (Check all that apply):**

\_\_\_\_\_ Festivals and Events                      \_\_\_\_\_ Arts

\_\_\_\_\_ Clerical/ Office                      \_\_\_\_\_ Tourism

\_\_\_\_\_ I am able to help a few hours per month on an as needed basis

\_\_\_\_\_ I am able to commit to 4 or more hours per month to serve on a committee

**Any special skills you would like to share?**

\_\_\_\_\_

T-Shirt Size:                      Small                      Medium                      Large                      Extra Large

**Volunteer Assumption of Risk and Waiver of Liability**

I understand that I may encounter various risks as a volunteer for Dixon Main Street. I hereby agree to assume those risks, release and hold harmless, Dixon Main Street, the City of Dixon, its employees, elected and appointed officials and any other representatives of DMS, including other volunteers, from any and all liability for injury to me or damage to my property which may result from my participation in volunteer activities. This release shall be binding on me and any other persons making claim through me or on my behalf.

I agree to release the use of my likeness, photo, video, or otherwise, that may be taken during my volunteer activities for use in promotional material without compensation to me.

\_\_\_\_\_  
Signature of Volunteer

\_\_\_\_\_  
Date

\_\_\_\_\_  
If the volunteer is under 18 years old, signature of parent/guardian

\_\_\_\_\_  
Date

**Please return to 115 S Hennepin Ave., Dixon. Or email to riverfrontdixon@gmail.com**