Big Sur International Marathon | Events & Organizations

VOLUNTEER APPLICATION

Half Marathon, 5K & 3K (November)
Marathon, Marathon Relay, 21, 10.6 & 9-Milers, 5K and 3K (April)

Return this form to:

P.O. Box 222620
Carmel, CA 93922

Questions?

Call 831.625.6226

WORKING FOR A GRANT GROUP? Please submit this form through your Grant organization
ARE YOU VOLUNTEERING FOR A CERTAIN DIRECTOR, COMMITTEE OR GRANT GROUP? Yes No

If yes, who?_____ and where?_____

I AM VOLUNTEERING FOR A: ☐ **HALF MARATHON EVENT (NOVEMBER)** ☐ **MARATHON EVENT (APRIL)**

LAST NAME _____ **FIRST** _____ **BIRTH DATE** _____ **T-SHIRT SIZE: S M L XL**

ADDRESS _____ **CITY**_____ **STATE**_____ **ZIP** _____

DAY PHONE _____ **EVENING** _____ **FAX** _____ **EMAIL**_____

VOLUNTEER DRIVERS: All drivers must be local residents and 21 years of age or older. Insurance certificate required if you provide vehicle.

CA License # _____ Expiration _____ Insurance Provider_____ Policy # _____

ARE YOU CPR CERTIFIED? Yes No NUMBER OF YEARS YOU'VE VOLUNTEERED FOR BSIM? _____

Shift times and days are dependent upon position. We will make every attemept to accomodate your choices within reason. You will be mailed or e-mailed a confirmation card. Some of the jobs listed may be more strenous than others; please notify us if that presents a problem. All volunteers will receive a T-shirt if they work at least four hours as well as an invitation to the race day volunteer party.

RELEASE AND WAIVER OF LIABILITY: Read carefully before signing.

I realize that participation in these Events involves risks, including physical demands, adverse weather and vehicles on or about the race course or at the various event venues, among other risks. I nevertheless wish to volunteer to participate in the event activity as a volunteer and I assume the risks involved, including physical injury or death. I am in good health and physically able to perform the activities I have chosen. If necessary, I authorize the Events to provide medical attention for me at my expense. In consideration of the foregoing, I hereby waive and release in advance all rights and claims for damages I may have against the Big Sur International Marathon, its Directors, officers, volunteers, employees, USAT&F, AIMS, Race Central, Inc., all sponsors, charities, community groups, contractors, suppliers, the State of California, and anyone otherwise connected with the Events, even those rights and/or claims resulting from their negligence. Further, I hereby grant full permission for all of the foregoing to use my likeness in any accounting of these Events. I have read and understand this entire Release and Waiver of Liability Agreement in exchange for the privilege of participating in the Events as a volunteer and for partaking of the facilities and benefits provided by these Events. I must be at least 16 years old unless accompanied by an adult.

_____ _____
Volunteer Signature Parent Signature (If volunteer under age 18)

_____
Date

THANKS FOR VOLUNTEERING!