



VOLUNTEER APPLICATION

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|--|--|--|------------|
| NAME: | | | |
| EMAIL: | | | |
| ADDRESS: | | | |
| BIRTHDAY: | | | |
| HOME PHONE: | | | |
| CELL PHONE: | | | |
| LIST ALL SHOWS OF INTEREST (PLEASE INCLUDE CITY & YEAR) | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | |
| WHAT DAYS ARE YOU AVAILABLE? | THURSDAY: | FRIDAY: | SET UP: |
| | SATURDAY: | SUNDAY: | BREAKDOWN: |
| ARE YOU AVAILIABLE TO WORK A NIGHT EVENT? IF SO WHAT NIGHTS? | | | |
| HAVE YOU EVER VOLUNTEERED WITH US BEFORE? IF YES, WHAT SHOWS AND POSTIONS DID YOU WORK? | | | |
| PLEASE LIST ANY JOB EXPERIENCE YOU THINK IS RELEVANT TO VOLUNTEERING AT CREATION EVENTS. | | | |

I understand and have read this application and if chosen, agree to participate in the event and attend this function. In consideration for being accepted as a volunteer, I irrevocably grant Creation Entertainment and all its employees, sponsors, and agents the exclusive right to use my name, likeness, photos or reproduction of my involvement of any purpose, including promotion, advertising, or otherwise. With these rights, I hereby release Creation Entertainment and all its employees, sponsors and agents from any and all claims, liabilities and/or damages which may now or in the future arise by reason of such use. Further, I acknowledge that I am/are aware of the risks associated with the participation of this event and on my behalf and that of my heirs', do hereby release Creation Entertainment and all its employees, sponsors and agents, from all claims, liabilities, and/or damages on account of any personal injury or property damage which may occur from any cause before, during or after the event. I agree to indemnify, defend and hold harmless Creation Entertainment from any and all damages, losses, claims, liabilities, charges, suits, penalties, costs and/or expenses, including but not limited to court costs, attorneys' fees and expenses, resulting from any act (whether intentional or not), omission or negligence of any injury to myself.

X _____
 (DIGITAL SIGNATURE)

 (DATE)