

WFHNB USE ONLY: THUR FRIDAY SAT SUN MON

# Wheatland Fishing Has No Boundaries

## Volunteer Registration Application

### El Dorado Lake

NAME \_\_\_\_\_ AGE \_\_\_\_\_ SEX \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_

STATE \_\_\_\_\_ ZIP \_\_\_\_\_ PHONE ( ) \_\_\_\_\_ VETERAN \_\_\_\_\_

E-MAIL \_\_\_\_\_

#### **AREA IF INTEREST:**

BOAT HELPER \_\_\_\_\_

FOOD ASSISTANCE \_\_\_\_\_

SETUP/TAKEDOWN \_\_\_\_\_

BAIT STATION \_\_\_\_\_

SECURITY \_\_\_\_\_

DOCK LOAD/ UNLOAD \_\_\_\_\_

REGISTRATION \_\_\_\_\_

FISH CLEANING \_\_\_\_\_

PRIZE TICKET SALES \_\_\_\_\_

RECREATION: GAMES \_\_\_\_\_

MEDICAL \_\_\_\_\_ LICENSED YES \_\_\_ NO \_\_\_

#### **DATES VOLUNTEERING**

THUR \_\_\_\_\_ (SETUP) FRIDAY \_\_\_\_\_ (SETUP) SAT \_\_\_\_\_ (EVENT)

SUN \_\_\_\_\_ (EVENT) MON \_\_\_\_\_ (TAKEDOWN)

**RELEASE OF CLAIMS:** In acceptance of my participation in the "Wheatland Fishing Has No Boundaries" fishing event, I release WFHNB; the city of El Dorado; the County of Butler; all respective agents and employees of the aforementioned and all volunteers who are connected with this event from any liability or claims for any injury to body or property or illness that I sustain during my participation in this event. I understand that this release applies to myself; my personal attendant; heirs and assigns. I represent that I am capable of participation and acknowledge that this release is being relied upon by the above persons in permitting me to participate. I also grant full permission to any or all foregoing to use any photographs; videotapes; motion pictures or any other records of this event for any legitimate purpose.

SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

**ENTRY MUST BE SIGNED BY PARTICIPANT OR LEGAL GUARDIAN**