



# 2016 VOLUNTEER FORM

DECEMBER 3, 2016  
THE MAC, UT ARLINGTON

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

Are you volunteering with a group? If so, what is the name: \_\_\_\_\_

**Volunteers are needed for approximately 3 to 6 hours for various assignments. VOLUNTEER MEETING and PEP RALLY will be held at 6:45 am, on the day of the race at The MAC.**

All volunteers receive a Winter Run Volunteer t-shirt to wear the day of the event

T-shirt Size: Unisex Long Sleeve | S | M | L | XL | XXL

(Circle one)

The race will be held regardless of weather conditions.

I understand that my consent to the following provisions is given in consideration for being permitted to participate as a volunteer in this event. I am in adequate physical condition to participate as a volunteer. The race administrators may remove me from the event. I am aware of, and voluntarily assume the risks of volunteering in this event. If I am injured, I agree that I will not sue or otherwise hold responsible the City of Arlington, The Runner, The Arlington-Mansfield Area YMCA, all sponsors, promoters, hosts and all other persons or entities associated with this event. I give my permission to all the foregoing to use my photographs, videotapes or other recordings of me that are made during the course of this event. I have read, understand and agree to the volunteer waiver/release form.

Signature \_\_\_\_\_

(Signature of a parent or guardian if age 18 or under)

Date \_\_\_\_\_

Return the completed Volunteer Form to:

Patty Haggerty  
pattyh@amaymca.org  
North YMCA Family Center  
1005 Skyline Drive, Arlington, TX 76011  
817-548-9622 ext. 3100



Arlington-Mansfield Area YMCA  
(formerly the YMCA of Arlington)

