



Liberty Camp Geauga

Liberty Camp Geauga 2020 Volunteer Registration

<<<<< Please print clearly >>>>>

There are many ways to become involved, and we welcome all levels of participation. Many hands, make light work, and the more volunteers, the more rewarding the experience for us all!

Last Name _____ First Name _____

Address _____ PO Box _____ City _____ Zip code _____

Email Address _____

Contact # _____ Cell ___ Home ___ Work ___

EMERGENCY CONTACT INFORMATION

Name _____ Contact # _____ Cell ___ Home ___ Work ___

Relationship _____ Alternate # _____ Cell ___ Home ___ Work ___

___ I WANT TO VOLUNTEER

Choose no more than three from the list below. See role descriptions on Liberty Camp Geauga's website.

___ **Group Leader**

___ **Craft Leader or Assistant**

___ **Section Leader**

___ **Re-enactor Assistant**

___ **Registration**

___ **Publicity**

___ **Set-up / Take Down**

___ **Costume Assistant**

___ **Photography / Videographer** ___ **Prop Design and Care**

Assistant

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PHOTO RELEASE

Please read the following photo release

As a Volunteer "I agree" constitutes your legal waiver as written.

All volunteers must have a signed Photo Release to participate at Liberty Camp Geauga 2020.

I hereby authorize the Liberty Camp Geauga 2020 and the Liberty Camp Geauga staff to use, reproduce and/or publish all written and/or visual materials, including photographs and video that may pertain to me. I understand that this material may be used in various publications, public affair releases, recruitment materials, or for other related endeavors. This material may also appear in newspapers, on the Liberty Camp Geauga website and/or Face book pages. This authorization is continuous and may only be withdrawn by my specific rescission of this authorization. Consequently, Liberty Camp Geauga 2020 and Liberty Camp Geauga staff may publish materials, use my name, my children's first names, photographs, video and/or make reference to same in any manner that is deemed appropriate in order to promote/publicize the event/program.

 I agree with the photo release statement above.

Full name printed: _____

Legal Signature: _____ Date: _____

LIABILITY WAIVER

Please read the following waiver of liability

As a Volunteer "I agree" constitutes your legal waiver as written.

All volunteers must have a signed Liability Waiver to participate at Liberty Camp Geauga 2020.

I certify that I have adequate accident Insurance and I will not hold Liberty Camp Geauga 2020, its Leaders, Staff or Volunteers liable for any and all claims related to participation in this program.

 I agree with the waiver release statement above.

Legal Signature: _____ Date: _____

**MAIL FORM TO:
Liberty Camp Geauga Registration
P.O. Box 250
Russell, Ohio 44072**

Thank you!