

 40TH ANNIVERSARY DINNER AND AUCTION “DAY OF”

VOLUNTEER REGISTRATION FORM

Thank you for your interest in volunteering at our 40th Anniversary Dinner and Auction event on Friday, October 23, 2015. 2015 is an exciting year for Nikkei Concerns as we celebrate 40 years of service to our community.

Please fill out this form and mail to ATTN: 40th Volunteer, Nikkei Concerns, 1601 East Yesler Way, Seattle, WA 98122 or email to 40thvolunteer@nikkeiconcerns.org by September 23, 2015. You can also fax to 206-588-4087. For questions, please contact Megumi Sherrill at 206-726-7830 or 40thvolunteer@nikkeiconcerns.org.

First Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Last Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_\_\_\_\_\_\_\_

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell Home Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Correspondences will be done through email unless you prefer to be contacted by Cell or Home phone

Are you at the age of 16 or 17? : Yes No

Time of availability: 8am-12pm 12pm – 5pm 5pm – 11pm (includes clean up) All Day

 If other, please specify time available: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Areas of interest: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do you have any special conditions that would alter the type of work you can do? Yes No

 If yes, please describe condition: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Emergency Contact Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Waiver and Release

Liability Disclaimer

By submitting this form, I will hold harmless indemnify Nikkei Concerns, officers, directors, sponsors and employees from and against any loss, damage liability claims, cost and expense including legal fees which may be incurred by reason of my volunteer participation in the Nikkei Concerns 40th Anniversary Dinner and Auction event unless such claims are a result of gross negligence or willful misconduct on the part of Nikkei Concerns.

Communications Release

I hereby assign the rights to any video and photographic recording made of me while volunteering at the 40th Anniversary Dinner and Auction event. I hereby authorize the editing, duplication, reproduction, copyright, exhibition, broadcast and/or non –profit use and distribution of said recordings for purpose deemed suitable by Nikkei Concerns. I hereby waive any rights to approve finished products.

I certify that I am over sixteen/seventeen years of age, my parent or guardian has signed the release on my behalf, and agrees to all the stipulations set forth in this document. I have read the foregoing release, authorization and agreement before affixing my signature below and warrant that I fully understand the contents thereof.

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Volunteer)

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Parent or Guardian if Volunteer under age 18)

*For Office Use Only:*

Date for received: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ By: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Comments: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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