

April 19-20, 2024 * Gardendale Civic Center ADULT VOLUNTEER APPLICATION

Name	P	none (Cell)	
Employment			
Mailing Address			
City		State	Zip Code
E-mail Address (MUST check this	email regularly)		
below that you can volunteer. Fe early shifts on Saturday. Friday s	el free to sign up for moi hifts are limited.	e than one sh	lay & Saturday. Please check all the time(s) nift! We particularly need help during the o volunteer for projects before festival
Friday 9am-3pm U-Pick hrs	Early Sat Morning ((6 am-9 am)	Sat morning (9am-Noon)
Sat Afternoon (Noon-3pm).	Sat Afternoon (3pn	n-6pm)	Sat Afternoon (3pm-6pm)
Anytime needed			
	Please indicate y	our T-shirt	
Take a pic or scan signed copy	<mark>of this application and e</mark>	<mark>mail to Gabri</mark>	telle Spruill <u>volunteermagfest@gmail.com.</u> val, please call or text (205) 790-4202
I/we, the undersigned, for and in considerating agree to indemnify, hold harmless, and defer against any and all claims, actions, lawsuits, part arising out of, connected with, or in any Gardendale Magnolia Festival or traveling to In the event of any emergency, I/we authorize	on of permission to participate as and the City of Gardendale, Alaba damages, judgments, liability, a way associated with my/our act o or from Gardendale Magnolia the City officials to secure from a dediate care, and agree that I will	s a volunteer for t ma, its officials, ind expenses, inchi ivities preparing f Festival. my licensed hospit be responsible fo	the Gardendale Magnolia Festival on April 19-20, 2024, representatives, agents, servants, and employees from and ading attorneys fees and litigation expenses, in whole or in for Gardendale Magnolia Festival, participating in tal. Physician, and/or medical personnel any treatment or payment for any and all medical services rendered. INDEMNIFICATION AGREEMENT.
	EMERG	GENCY CON	TACT PHONE#
Signature of Volunteer	Date		

MAGNOLIAFESTIVAL.ORG