

## April 19-20, 2024 \* Gardendale Civic Center <u>STUDENT VOLUNTEER APPLICATION</u>

Name	Phone (Cell)	
Organization/School		(Grade)
Mailing Address		
City	State	Zip Code

E-mail Address (Student MUST check this email regularly)

\*Volunteers will be assigned to different shifts throughout the day Friday & Saturday. Please check all the time(s) below that you can volunteer. Feel free to sign up for more than one shift! We particularly need help during the early shifts on Saturday. Friday shifts are limited.

If you can ONLY work before the festival weekend to get your volunteer hours for the scholarship requirement, please state the reason for approval. You can also work both festival weekend AND on projects before the festival to acquire more hours toward the scholarship.

Early Sat Morning (6 am-9 am)	Sat Morning (9am-Noon)			_	Sat Afternoon (Noon-3pm)			
Sat Afternoon (3pm-6pm)	_Friday 9	am-3pm U-Pick	hrs		Friday	(3pm-6pm _	6-9pm)	
Sat Afternoon (3pm-6pm)	_March (	(TBD) Posting fly	yers/Deliv	ver signs	t shirts/	Anyt	ime needed	
I can only volunteer before the fes	tival week	cend. State reason	n					
Please indicate below if yo YES The Gardendale Magnolia Festiv	al does no		illing com	munity se	NO rvice hours	required by a	judge.	
	Please	e indicate your	T-shirt	size:			••••	
	s	ML	_XL	2X	_3X			
Take a pic or scan signed copy of the For more information about v								
I/we, the undersigned, for and in consideration of agree to indemnify, hold harmless, and defend the against any and all claims, actions, lawsuits, dam part arising out of, connected with, or in any way Gardendale Magnolia Festival or traveling to or 1 In the event of any emergency, I/we authorize Cit deemed necessary for my or my ward's immediat I HAVE READ AND FULLY UNDERSTOOD	e City of Ga ages, judgm associated v from Garder ty officials to te care, and a	rdendale, Alabama, ir ents, liability, and ex with my/our activities idale Magnolia Festiv o secure from any lic agree that I will be re	ts officials, i penses, incl s preparing f val. ensed hospi sponsible fo	representat uding attor for Garden tal. Physic or payment	ives, agents, neys fees and dale Magnoli ian, and/or m for any and a	servants, and er d litigation expe la Festival, parti edical personne all medical servi	nployees from and nses, in whole or in cipating in l any treatment ices rendered.	
		EMERGEN	ICY CON	TACT F	HONE#			
Signature of Volunteer	Date							
Signature of Parent or Legal Guardian	Date	MUST BE SIGN	ED BY PA	RENT OR	LEGAL G	UARDIAN IF U	UNDER 19.	

MAGNOLIAFESTIVAL.ORG