

## Special Event Volunteer Application

Directions: In the spaces below, Please give us some background Information on yourself. If any section does not apply to you, please indicate by writing N/A. Please return the completed application to:

City of Bedford  
Parks and Recreation Special Events  
2000 Forest Ridge Dr  
Bedford TX 76021  
Questions????? Call 817-952-2128, or email [wendy.hartnett@ci.bedford.tx.us](mailto:wendy.hartnett@ci.bedford.tx.us)

### PLEASE PRINT OR TYPE LEGIBLY

#### PERSONAL INFORMATION

*Full Name:* \_\_\_\_\_ *Age:* \_\_\_\_\_ *Date of Birth:* \_\_\_\_\_

*Street Address:* \_\_\_\_\_ *City:* \_\_\_\_\_ *State:* \_\_\_\_\_ *Zip:* \_\_\_\_\_

*Home Phone:* \_\_\_\_\_ *Cell Phone:* \_\_\_\_\_ *E-mail:* \_\_\_\_\_

**Emergency Name and Contact phone number:** \_\_\_\_\_

#### CRIMINAL HISTORY AND DRIVING RECORD

*Have you ever been arrested for any offense other than a traffic violation and/or convicted of a felony or misdemeanor? Yes [ ] No [ ]*

*If yes, please explain:*

*Have you had any traffic citations and accidents in the past two years?*

#### PREFERENCES

Please circle your job preference(s):

Support team                      Kids Area                      Information booth                      Inflatable area  
Ticket Sales                      Merchandise Sales

Do you feel comfortable handling money and making change?

Do you have another volunteer you would like to work with?  
(Please include name of person)

*Time Preference: (Please circle)*    2PM-530PM                      5PM-830PM                      8PM-1030PM  
*Saturday or Sunday??*

*T-shirt size:*    SMALL                      MEDIUM                      LARGE                      X-LARGE                      XXLARGE

The information in this application is true and complete, and I have not knowingly withheld any information. I understand that misrepresentation may be cause for dismissal. I authorize verification of all information contained in this application. I understand that as a volunteer at the City of Bedford, I will be expected to demonstrate a commitment to uphold the mission of the organization, to maintain an environment of integrity for people, and to focus on customer service, with respect for all employees, volunteers and guests.

As a volunteer of the City of Bedford, I agree to follow all City guidelines and policies. In addition, I give consent to the City of Bedford to emergency medical attention in the event that I am not able to give consent, nor my emergency contacts are available I am aware that the City of Bedford has the right to release me from service at any time, just as I have the right to withdraw from volunteer service at any time.

THE UNDERSIGNED, INDIVIDUALLY AND AS LEGAL GUARDIAN OF ANY MINOR NAMED BELOW, DOES HEREBY AGREE TO INDEMNIFY AND HOLD HARMLESS THE CITY OF BEDFORD, TEXAS, ITS ELECTED AND APPOINTED OFFICIALS, EMPLOYEES, AGENTS, CONTRACTORS, ATTORNEYS AND ASSIGNS (THE "INDEMNIFIED PARTY") FROM ANY AND ALL LIABILITY AND CLAIMS ASSOCIATED WITH THE BEDFORD LABOR DAY BLUES FEST AND BAR-B-Q, OR IN ANY WAY CONNECTED THERETO INCLUDING, BUT NOT LIMITED TO, THE VOLUNTEER ACTIVITIES OF THE UNDERSIGNED, INDIVIDUALLY AND AS LEGAL GUARDIAN OF ANY MINOR NAMED BELOW, AND SHALL PAY AND DEFEND OR PAY JUDGMENTS AGAINST IT OR THE INDEMNIFIED PARTY FROM AND AGAINST ANY AND ALL CLAIMS, DEMANDS, OR CAUSES OF ACTION, INCLUDING CLAIMS FOR CONTRIBUTION OR INDEMNITY, AND THE REASONABLE AND NECESSARY COSTS, INCLUDING ATTORNEY'S FEES INCURRED IN DEFENSE OF ANY SUCH CLAIM OR CAUSE OF ACTION WHICH ANY OTHER PERSON, FIRM, CORPORATION OR ENTITY HAS OR MAY HAVE ARISING OUT OF OR RESULTING FROM THE BEDFORD LABOR DAY BLUES FEST AND BAR-B-Q EVENT, OR IN ANY WAY CONNECTED THERETO.

As a volunteer of the City of Bedford, I agree to follow all City guidelines and policies. In addition, I give consent to the City of Bedford to emergency medical attention in the event that I am not able to give consent, nor my emergency contacts are available I am aware that the City of Bedford has the right to release me from service at any time, just as I have the right to withdraw from volunteer service at any time.

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

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Volunteer Application**

If the volunteer applicant is under the age of eighteen, a parent or guardian must also review these items and sign below.

I, \_\_\_\_\_, am the parent or legal guardian of  
\_\_\_\_\_ and I agree to allow him/her to be bound by the conditions  
represented above.

\_\_\_\_\_  
Parent/Guardian Signature Date