



Creation Festival Volunteer

Applicant's Statement – Read Carefully!

(For Applicants 18 and older)

We at Creation are excited that you have chosen to give of your time and talents by serving as a volunteer staff member in the ministry at Creation 2012. Creation strives to create a safe and enjoyable time for all those on site, both serving and attending. Because of this we ask that you read and understand and sign this to serve this year.

In consideration, by the Creation Festival, to serve on the volunteer staff at Creation 2012, I agree and represent that:

- The information contained in my staff application is correct to the best of my knowledge.
- I, the applicant, understand this is strictly a volunteer position where I, the applicant, wishes to serve as part of the ministry at Creation 2012. As a volunteer I make myself accountable to the leadership, policies, and moral behavior that is expected and accepted based on our faith, as outlined in the Volunteer Code of Conduct, or simply maintained through practice.
- I the hereby give permission for Creation Festivals or its representatives to secure needed medical treatment if deemed necessary by Creation's sole discretion, in the event that the applicant is not able to give his/her own consent, and further agree to assume the costs and expenses for such medical treatment.
- I the applicant agree to indemnify Creation Festivals for any liability sustained by Creation Festivals as the result of the information improperly expressed or omitted during the application process or in the event medical treatment is required, including expenses that may be incurred. I also hereby hold harmless of any liability, whether civil or criminal that may arise as a result of the aforementioned application process. I further release and hold harmless any individual, employer, church, denominational agency or official, reference or any other person or organization, both collectively and individually, and whether or not identified in this application, from any and all liability for damages of whatever kind or nature which may at any time result to me, my heir, or family, on account of compliance or any attempts to comply with this authorization.

I HAVE READ AND UNDERSTAND THE ABOVE PROVISIONS, AND AGREE TO THEM AS IT PERTAINS TO MY ACCEPTANCE AS VOLUNTEER STAFF AT CREATION 2012. I AM 18 YEARS OF AGE OR OLDER:

X _____
 Signature of Applicant
 (Unsigned releases will not be considered)

 Address of Applicant

 Printed Name

 City, State, ZIP

 Date

 Daytime Contact Number

This release form must be presented at the time of check-in or the volunteer will not be allowed to serve.

A facsimile or photocopy of this authorization shall be as valid as the original.

<p>STAFF OFFICE USE ONLY</p> <p>ID VERIFIED BY:</p> <p>Name _____</p>
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