

BLUE RIBBON FOUNDATION BINGO 2018 VOLUNTEER REGISTRATION FORM

Volunteer Name: _____ Date: _____

Shift Time	WED 8/15
8am-12pm	
12pm-4pm	
4pm-8pm	

Mail forms to:
Iowa State Fair Blue Ribbon Foundation
P.O. Box 57130
Des Moines, IA 50317
Attn: Julianna

As a new fundraising venture, the Blue Ribbon Foundation will be having its first ever Bingo tent on Grand Avenue on Wednesday, August 15th. We are looking for 8 volunteers per shift. The three volunteer shifts are as follows:

- **8am-12pm:** Help set up and run the games by selling Bingo cards and announcing numbers.
- **12pm-4pm:** Run the games.
- **4pm-8pm:** Run the games and help clean up.

Please list the names of other volunteers you would like to work with: _____

*We will do our best to schedule you with them, but they **must also complete and return** the volunteer information. Listing their names here does not guarantee they will be scheduled.

- ❖ Volunteers will receive a gate admission ticket and a parking permit for the day(s) scheduled to work, as well as a complimentary t-shirt to be worn while working.
- ❖ We will do our best to accommodate your preferences.
- ❖ Volunteers must be at least 16 years old or accompanied by a parent or guardian. All volunteers must be 12 or older.
- ❖ Please be flexible as a Foundation staff member may reassign you where needed during your volunteer shift.

2018 VOLUNTEER INFORMATION SHEET

Please complete one form for each volunteer.

First Name: _____ Last Name: _____ Middle Initial: _____

Address: _____ City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____ E-mail Address: _____

Birth Date (m/y): _____ Spouse's Name: _____ T-Shirt Size: S M L XL XXL XXXL

Emergency Contact: _____ Emergency Phone: _____

Have you volunteered with the Blue Ribbon Foundation at the Iowa State Fair before? Yes No

Employer: _____ Occupation: _____ Full Time Part Time Retired

Iowa State Fair Blue Ribbon Foundation Volunteer Background Check Authorization Waiver & Hold

I wish to work as a volunteer for the Iowa State Fair Blue Ribbon Foundation and engage in activities related to being a volunteer. In consideration for the opportunity to work as a volunteer for the Foundation, I agree to the following:

Background Check: The safety of all in attendance at the Iowa State Fair is the most important consideration in the appointment of a volunteer for the Iowa State Fair Blue Ribbon Foundation. To help safeguard all persons and pursuant to Iowa law, the Blue Ribbon Foundation conducts background checks on volunteers. Information obtained will be handled by the Foundation in a confidential matter.

I hereby give my permission for the Foundation and its agents to obtain information relating to my criminal history. I understand that this record will be used, in part, to determine my eligibility for a volunteer position with the Foundation. I also understand that as long as I remain a volunteer with the Iowa State Fair Blue Ribbon Foundation, background checks may be repeated at any time.

I hereby release and discharge the Iowa State Fair Blue Ribbon Foundation from and against any and all causes of action, liabilities, and claims resulting from the investigation of my background in connection with my application to be a volunteer. I understand that the Foundation may choose not to select me as a volunteer based upon the information obtained pursuant to this authorization. In such cases I will be notified of this result via telephone or written correspondence.

Hold Harmless Agreement: By signature below, I expressly accept and assume all risks inherent in volunteer activities with the Foundation. My participation is purely voluntary. I hereby release and hold harmless and forever discharge, the State of Iowa, the Iowa State Fair Authority, the Iowa State Fair Foundation, the Iowa State Fair Board; their agents, officers, employees and volunteers, and their respective successors from any and all claims, demands, or causes of action whatsoever that are connected with my participation as a volunteer for the Blue Ribbon Foundation.

I have read and understand this document and I agree to be bound upon my signature below.

Full Legal Name (printed): _____ Date of Birth (MM/DD/YYYY): _____

Signature: _____ Parent/Guardian Signature (if under 18): _____

