



www.TourMcDonough.com
 5 Griffin Street, McDonough, GA 30253
 770.898.3196

Contact Information

Name	
Cell Phone	
Work Phone	
E-Mail Address	
Emergency Contact Info:	

Availability

During which hours are you most likely available for volunteer assignments?

- | | |
|---|---|
| <input type="checkbox"/> Weekday mornings | <input type="checkbox"/> Weekend Mornings |
| <input type="checkbox"/> Weekday Afternoons | <input type="checkbox"/> Weekend Afternoons |
| <input type="checkbox"/> Weekday Evenings | <input type="checkbox"/> Weekend Evenings |

Interests

Tell us in which areas you are interested in volunteering:

- Events
- Fundraising
- Volunteer Coordination with Projects
- Provide Technical Assistance
- Strategize and Develop Solutions
- Recruiting Volunteers
- Assist with Advertising and Marketing
- Other

Agreement and Signature

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as a volunteer, any false statements, omissions, or other misrepresentations made by me on this application may result in immediate dismissal.

Name (printed)	
Signature	
Date	

MCDONOUGH HOSPITALITY & TOURISM BOARD, INC.

VOLUNTEER WAIVER

Name of Volunteer: _____

Event: _____

Date: _____

In consideration of the acceptance of this entry, the undersigned, and for his or her heirs, successors and assigns, (1) hereby waives any and all claims against the sponsors, officials, employees, Board Members or other associates of McDonough Hospitality & Tourism Board, Inc., for injuries, illness or damages which may result directly or indirectly from my participation: and (2) expressly releases said sponsors, officials, employees, Board Members or other associates of McDonough Hospitality & Tourism Board, Inc., from any and all such claims for injury, illness or damage resulting therefrom. The undersigned affirms that he or she is in proper condition to volunteer at the event.

This _____ day of _____, 2012.

Volunteer