

Stage 3 – Time Trial Volunteer Application

Ford Tour de Georgia
Thursday, April 20, 2006

Thank you for your interest in becoming a part of the Ford Tour de Georgia professional bicycle race!
Please complete the application and waiver and return to: **Outdoor Chattanooga, 1250 Market Street, Chattanooga, TN., 37402 Attn: Volunteer Program or Fax 423-643-6885.**
E-mail: ProdTekSvc@aol.com (please mail in application as we need to have your actual signature).

Please Print Clearly

Name _____ Email _____

Mailing Address _____

C/S/Z _____ Age _____ Sex _____

Home Phone _____ Work Phone _____

Emergency Contact Name/Phone _____

SHIRT SIZE (circle one) Med Lrg xLrg xxLrg

Volunteer's Acknowledgement, Waiver and Release of Liability

In consideration of the event organizer allowing me the opportunity to participate:

- I attest and verify that I am eighteen (18) years of age or older, physically fit and sufficiently trained to participate in all activities associated with the program or event. My participation in activities and events organized or sponsored by Ford Tour de Georgia and its member associations is voluntary.
- I assume all risks associated with my participation in activities and events organized or sponsored by Ford Tour de Georgia and its members associations, including injuries or illness to person and damage or loss to property.
- For any injury, illness, property damage or loss suffered or sustained by me which is in any way associated with my participation, in travel to and from, or activity associated with the above noted program or event, I do hereby, for myself, my heirs, my administrator and executions, forever waive, release and discharge and agree to indemnify for any and all rights and claims, for any expenses, damages or other losses which I may have or which my hereinafter accrue, against Ford Tour de Georgia, the State of Georgia, its member associations, member clubs, sponsors and organizations or their respective representatives, officers, directors, employees, agents successors and assigns, I agree to abide by the participants rules and policies adopted from time to time by Ford Tour de Georgia and it's member associations.
- In the event that I am unable to do so on my own because of an injury, I consent to administration of first aid and other medical treatment in the event of injury and agree to pay the cost of any such treatment.

I hereby state that I have read and understand the above stated accident waiver and release from Liability; I agree to handle my assignments in a dedicated, courteous and responsible manner. I will follow the instruction of the organizers, officials and staff to the best of my ability.

Print Volunteer Name Clearly

Volunteer's Signature

Date Signed

Official Use Only
Location: _____
Orientation _____ Shirt _____