



# Lake Garnett Grand Prix Revival

Incorporated  
Volunteer Application Form

Name: \_\_\_\_\_

Street: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone (Home): (\_\_\_\_)\_\_\_\_\_ Work: (\_\_\_\_)\_\_\_\_\_ Cell: (\_\_\_\_)\_\_\_\_\_

E-mail: \_\_\_\_\_ Alternate Email: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Telephone: (\_\_\_\_)\_\_\_\_\_

Times/Date Available: \_\_\_\_\_

Volunteer interest/skills: \_\_\_\_\_

How did you hear about Lake Garnett Grand Prix Revival? (Website, friend, radio, other):  
\_\_\_\_\_

Shirt Size: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ (optional)

I wish to volunteer for the Lake Garnett Grand Prix Revival. I understand that the nature of volunteer activities that I may perform in my capacity as a volunteer may involve physical activity, contact with unidentified and/or unfamiliar persons, or other potential risk of bodily injury or damage to property. Knowing this and in consideration of being allowed to volunteer, I hereby declare that I will sign the Lake Garnett Grand Prix Revival Incorporated Waiver and Release of Liability Form, and will assume full and complete responsibility for any personal injury and/or property damage that I sustain or cause during my participation as a volunteer.

Printed name of volunteer: \_\_\_\_\_

Volunteer's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*If volunteer is under age 18:*

Printed name of parent/guardian: \_\_\_\_\_

Parent/guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Mail to: Lake Garnett GP Revival, 2814 Oregon Lane, Manhattan KS 66502 or email to [info@lggpr.org](mailto:info@lggpr.org)