Gliding Stars of Toledo
Volunteer Registration 2010-2011 Season

Please print and complete all items.

On Ice Volunteer Information:

Name: _____
(First) (Middle) (Last)

___Male ___Female Date of Birth: _____

Street: _____

City/State: _____ Zip: _____

Phone: _____

E-mail: _____

Phone number for receiving text messages:

_____

On Ice Volunteers please rate your skating level:

____ Beginner ____ Intermediate _____ Advanced

How many years have you volunteered for us? _____

If you are younger than 18 years of age, please also complete items below:

Parent/Guardian Name:
_____
Address (if different from Volunteer's address above):
_____

Phone: _____

E-mail: _____

Parent/Guardian Emergency Contact / Phone:
_____

Volunteer's School:_____

School Grade:_____

Have you ever been convicted of a crime?
____ Yes ____ No

Please include your shirt size below:
Children
___ XS ___ S ___ M ___ L ___ XL

Adult
___XS ___ S ___M ___ L ___ XL ___ XXL

Chapter Information
Gliding Stars of Greater Toledo
P.O. Box 2526
Toledo, OH 43606-2526
(419) 304-4324

Agreement/Permission Statement:

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(Words enclosed in brackets are for a parent or guardian of participants who are under age 18 and/or require such additional permission.)

I agree *[give my permission for the volunteer listed on this form]* to voluntarily assist Gliding Stars in weekly adaptive ice skating sessions and the Ice show at the conclusion of the program season ("Activity"), and to cooperate fully with those in charge of each session or event that are part of the Activity.

I agree [*give my permission for the volunteer listed on this form*] to be photographed, videotaped, or interviewed by any television, radio, newspaper, magazine, private person or group, and that the gathered material may be transmitted by electronic media or otherwise used in Gliding Stars published materials or in other ways for the enhancement of the Gliding Stars program.

I understand [*on behalf of the volunteer listed on this form*] that ice skating involves some physical risk. and I assume all risk for property damage, personal injury or death to the volunteer as a result of or in connection with the Activity and my, and the volunteer's, use of the Property.

I agree [*on behalf of the volunteer listed on this form*] to indemnify, defend, and hold harmless the Gliding Stars from and against, any and all loss, liability, damage, claim, expense, fines, penalty, interest, cost, or other obligation of any nature, and injury to or death of any person, or for loss or damage to any property, arising as a result of or in connection with the Activity or my use or use by the volunteer, of the Property.

NO PORTION OF THE ABOVE CAN BE CROSSED OUT OR ALTERED.

Volunteer Signature (if 18 or older)

Parent/Guardian Name (if volunteer under age 18)
(please print)

Parent/Guardian Signature (if volunteer under age 18)

Date _____