



Remembrance on the River and the AMVETS Service Foundation encourage the participation of volunteers who support our mission. If you agree with our mission and are willing to help with our events, we encourage you to complete this application. The information on this form will be kept confidential and will help us find the most satisfying and appropriate volunteer opportunity for you.

Thank you for your interest in Remembrance on the River.

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

Address: \_\_\_\_\_

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

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Employer: \_\_\_\_\_ Position: \_\_\_\_\_

Any special talents or skills you have that you feel would benefit our organization?

\_\_\_\_\_

Interests: Please tell us in which areas you are interested in volunteering

<input type="checkbox"/> Administration	<input type="checkbox"/> Set Up
<input type="checkbox"/> Parking	<input type="checkbox"/> Break Down
<input type="checkbox"/> Information Booth	<input type="checkbox"/> Field of Flags
<input type="checkbox"/> Fundraising	<input type="checkbox"/> Street Team
<input type="checkbox"/> Tours	<input type="checkbox"/> Line Assistance

Please indicate days available:

**Thursday May 25\* Fri May 26\* Sat May 27\* Sun May 28\***

Times available: From \_\_\_\_\_ to \_\_\_\_\_

Any physical limitations? \_\_\_\_\_

In case of emergency contact: \_\_\_\_\_

*As a volunteer for ROTR, I agree to abide by the policies and procedures. I understand that I will be volunteering at my own risk and that ROTR and AMVETS Service Foundation, its employees and affiliates, cannot assume any responsibility for any liability for any accident, injury or health problem which may arise from any volunteer work I perform for ROTR. I agree that all the work I do is on a volunteer basis and I am not eligible to receive any monetary payment or reward.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_