



American Diabetes Association.

Saturday, September 12, 2015 – Detroit Zoo
VOLUNTEER FORM

I would like to join the Helping Hands Team (please see attached paper for more information)
I am interested in volunteering for office projects prior to the Step Out Walk. Please contact me!

Please sign up for one or more of the following volunteer areas. Space is limited, so we will fulfill volunteer areas on a first come, first serve basis.

- Event Day Set-Up 6:30am
Pre-Event Greeters 7:00 am – 9:00am
Gift distributor 7:45am – 11:00am
Hospitality Hosts 7:45 – 11:00am
Finish-Line 8:30am – 10:30am
Clean up 9am – 11am
Please assign me to the area needing the most assistance!
I am available all morning and can volunteer for more than one assignment!

Want to volunteer with someone you know?
Write their name below and we will try to put you together!

Note: You will receive an email confirmation once your application has been received. Volunteer times listed are tentative and are subject to change. All volunteers will receive breakfast and a Step Out T-shirt!

Name
Date of birth:
Address
City
State
Zip
*Email (Required)
*Cell Phone
Home Phone
*Emergency Contact Name
*Emergency Contact Phone
T-shirt Size: S M L XL XXL

Y N RED CREW: Red Crew members are volunteers living with diabetes.

Please fax, email or mail your completed form back to the American Diabetes Association.
Fax: Attn: Jennifer Woodruff/Step Out Walk Volunteers 248-352-0261
Email: jwoodruff@diabetes.org
Mail: American Diabetes Association Attn: Step Out Walk 300 Galleria Officentre, Suite 111 Southfield, Michigan 48034
Questions? Contact Jennifer at 248-433-3830 x 6720

I acknowledge and assume all risks associated with this event including, without limitation, falls, animal bites, food poisoning, effects of weather, including heat and humidity, traffic, road and ground conditions. I have read and fully understand this waiver and in consideration of the acceptance of my entry, for myself and anyone legally acting on my behalf, I waive and release the American Diabetes Association, Inc. ("ADA"), its employees, directors, officers, volunteers, agents, successors and assigns from any and all claims, liabilities, or causes of action, including without limitation, death, bodily injury, property damage, or any other loss, damage or any inconvenience whatsoever, arising from my participation in this event.

X Signature Date: