

## South Carolina Peach Festival 2023 Volunteer Application Form

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

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

Cell phone: \_\_\_\_\_ Email: \_\_\_\_\_

Shirt size: - S-----M-----L-----XL-----2XL-----3XL-----Other \_\_\_\_\_ - Circle one

**Morning**

**Mid-Day**

**Afternoon**

**Evening**

<b>Thursday, July 13<sup>th</sup></b>				
New Talent Night				
Limestone College - 7pm				
<b>Friday, July 14<sup>th</sup></b>				
Kickoff - 5pm to 11pm				
Beer Tent / Info Booth				
Car Show				
Arts and Crafts Show				
<b>Saturday, July 15<sup>th</sup></b>				
6am to 11pm				
Beer Tent / Info Booth				
Gate Entry				
Parade				
Pageant				
Arts and Crafts Show				
Dessert Contest				
<b>Sunday, July 18<sup>th</sup></b>				
Community Worship 6pm				
<b>Saturday, July 23<sup>rd</sup></b>				
Mud Bogg				
Beer Tent / Info Booth				
Gate Entry				

**Mail this form to South Carolina Peach Festival, Volunteer, PO Box 549, Gaffney, SC 29342**

We greatly appreciate your assistance and commitment to the South Carolina Peach Festival. Our insurance policy requires that we have an accurate record of all volunteers. This is an annual form where you agree to release the South Carolina Peach Festival and its officers, directors, employees, sponsors, and volunteers (collectively referred to as "South Carolina Peach Festival") of all liability while working with the South Carolina Peach Festival. This form is in effect for one year from the signing date. This Release and Waiver of Liability (the "Release") executed by the "Volunteer" in favor of South Carolina Peach Festival, Inc., a South Carolina nonprofit corporation, and engage in the activities related to be a volunteer (the "Activities"). The Volunteer understands that the Activities may include participating in any activity related to the schedule of events for the South Carolina Peach Festival. The Volunteer hereby freely, voluntarily and without duress executes this release under the following terms:

**Release and Waiver:** Volunteer does hereby release and forever discharge and hold harmless South Carolina Peach Festival, Inc. and its successors and assigns from any and all liability, claims, and demands of whatever kind or nature, either in law or in equity, which arise or may hereafter arise from Volunteer's Activities with South Carolina Peach Festival. Volunteer understands that this Release discharges South Carolina Peach Festival from any liability or claim that the Volunteer may have against South Carolina Peach Festival with respect to any bodily injury, personal injury, illness, death, or property damage that may result from the Volunteer's Activities with South Carolina Peach Festival, whether caused by the negligence of South Carolina Peach Festival or its officers, directors, employees, or agents or otherwise. Volunteer also understands that South Carolina Peach Festival does not assume responsibility for or obligation to provide financial assistance or other assistance, including by not limited to medical, health, or disability insurance in the event of injury or illness.

**Medical Treatment:** Volunteer does hereby release and forever discharge and hold harmless South Carolina Peach Festival from any claim whatsoever which arises or may hereafter arise on account of any first aid, treatment, or service rendered in connection with the Volunteer's Activities with South Carolina Peach Festival.

**Assumption of the Risk:** The Volunteer understands that the Activities include work that may be hazardous to the Volunteer. Volunteer hereby expressly and specifically assumes the risk of injury or harm in the Activities and release the South Carolina Peach Festival from all liability for injury, illness, death, or property damage resulting from the Activities.

**Insurance:** The Volunteer understands that, except as otherwise agreed to by South Carolina Peach Festival in writing; South Carolina Peach Festival does not carry or maintain health, medical, or disability insurance for any Volunteer. Each Volunteer is expected and encouraged to obtain his or her own medical or health insurance coverage.

**Photographic Release:** Volunteer does hereby grant and convey unto South Carolina Peach Festival all rights, title, and interest in any and all photographic images and video or audio recordings made by South Carolina Peach Festival during the Volunteer's Activities with South Carolina Peach Festival, including, but not limited to, any royalties, proceeds, or other benefits derived from such photographs or recordings.

**Other:** Volunteer expressly agrees that this Release is intended to be as broad and inclusive as permitted by the laws of the State of South Carolina and that this Release shall be governed by and interpreted in accordance with the laws of the State of South Carolina. Volunteer agrees that in the event that any clause or provision of this Release shall be held to be invalid by any court of competent jurisdiction, the invalidity of such clause or provision shall not otherwise affect the remaining provisions of this Release which shall continue to be enforceable.

IN WITNESS WHEREOF, Volunteer has executed this Release as of this date \_\_\_\_\_ of 2023.

Volunteer Name (Print Please) \_\_\_\_\_

Volunteer Signature: \_\_\_\_\_

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

Group/Organization (If Applicable): \_\_\_\_\_

IF THE VOLUNTEER IS UNDER THE AGE OF 18, A PARENT OR LEGAL GUARDIAN MUST SIGN

Parent Signature: \_\_\_\_\_

In case of emergency, please contact: Name: \_\_\_\_\_

Relation \_\_\_\_\_

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