



**CMRC CHICAGO OPEN  
JUNE 4-7, 2010  
Belmont Harbor  
Chicago, IL**

**VOLUNTEER INFORMATION FORM**

The Chicago Match Race Center is dedicated to providing match racing opportunities in the Chicago community. To keep match racing accessible to everyone, volunteers are an integral part of the CMRC operations. Please contact [beth@chicagomatchrace.com](mailto:beth@chicagomatchrace.com) with any questions.

**NAME** \_\_\_\_\_

**ADDRESS** \_\_\_\_\_

**DAY PHONE #** \_\_\_\_\_ **CELL #** \_\_\_\_\_

**EMAIL** \_\_\_\_\_

**SHIFTS AVAILABLE (Circle all that apply):**

<b>Thursday, June 3<sup>rd</sup></b>	<b>12pm – 4pm</b>	<b>4pm – 8pm</b>	
<b>Friday, June 4<sup>th</sup></b>	<b>7am – 12pm</b>	<b>11am - 4pm</b>	<b>3pm – 7pm</b>
<b>Saturday, June 5<sup>th</sup></b>	<b>7am – 12pm</b>	<b>11am – 4pm</b>	<b>3pm – 7pm</b>
<b>Sunday, June 6<sup>th</sup></b>	<b>7am – 12pm</b>	<b>11am – 4pm</b>	<b>3pm – 7pm</b>
<b>Monday, June 7<sup>th</sup></b>	<b>7am – 12pm</b>	<b>11am – 4pm</b>	<b>3pm – 7pm</b>

**SPECIAL NOTES**

Please describe any special needs or concerns that we should be aware of, when scheduling and assigning volunteer duties. Also, if you have specific skills or a preference of tasks, please list them here.

\_\_\_\_\_  
\_\_\_\_\_

**SUBMIT:** **Email** - Please scan and send (both pages) to [beth@ChicagoMatchRace.com](mailto:beth@ChicagoMatchRace.com)  
OR  
**Fax** – Please fax to 312-542-1085, Attn: Beth



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**2010 VOLUNTEER WAIVER AND RELEASE FORM**

VOLUNTEER WAIVER AND RELEASE – For participants, 18 years and older.

I acknowledge that volunteering at a sailing event or any other sporting event is an extreme test of a person's physical and mental limits and carries with it the potential for death, serious injury or property loss. I HEREBY ASSUME THE RISKS OF PARTICIPATING IN THE CHICAGO MATCH RACE CENTER EVENT (HEREAFTER KNOWN AS "EVENT"). In consideration of permission to participate in the Event, and other adequate and sufficient consideration, I hereby take the following action for myself, my executors, administrators, heirs, next of kin, successors and assigns: a) I WAIVE, RELEASE AND DISCHARGE from any and all claims, costs or liabilities, death, personal injury or damages / expenses of any kind, which arise out of or related to my participation in, or my traveling to and from the Event, THE FOLLOWING PERSONS OR ENTITIES: Chicago Match Race Center, Belmont Harbor, City of Chicago, State of Illinois and any sponsor, celebrity, official or other entity or individual associated with the Event, including, without limitation, the officers, employees and representatives of any of the foregoing (collectively, the "Event Entities"); b) I AGREE NOT TO SUE any of the Event Entities from any claims made or Liabilities assessed against them as a result of my actions except for those resulting from willful acts of gross negligence of any such Event Entity; and c) I HEREBY WAIVE ANY RIGHT I HAVE TO TRIAL BY JURY in any litigation arising from my participation in the Event. I HEREBY AFFIRM THAT I AM EIGHTEEN (18) YEARS OF AGE OR OLDER, I HAVE READ THIS DOCUMENT AND I UNDERSTAND ITS CONTENTS.

**PRINTED NAME** \_\_\_\_\_ **DATE** \_\_\_/\_\_\_/\_\_\_\_\_

**SIGNATURE** \_\_\_\_\_

If Volunteer is under 18 years of age, Parental (or Guardian) consent is required.

PARENT / GUARDIAN PRINTED NAME: \_\_\_\_\_

PARENT / GUARDIAN SIGNATURE: \_\_\_\_\_