



VOLUNTEER APPLICATION

Applicant Name: _____ Address: _____

Telephone No.: _____ Email Address: _____

1. Are you a member of an organization volunteering for the 15th Annual Korean Festival ("AKF") this year? ____ Yes ____ No
2. If your answer is "Yes", what are the name and contact information for the organization?
Organization: _____

Contact Person: _____ Phone No. / Email Address: _____

3. If your answer above is "No", why do you want to volunteer for the 15th Annual AKF?

4. Have you volunteered for the Korean Festival before? ____ Yes ____ No

All information provided will be kept private and used for 15th AKF purposes only and will not be disclosed to third parties except with the applicant's consent or if required by law. The person signing this form certifies he/she: a) is the applicant and at least 18 years of age, or is the legal guardian of the applicant younger than 18 years old, b) voluntarily provides true and correct information in this form, c) will provide more information to 15th AKF organizers if asked, d) desires to perform the acts and duties required of a volunteer, e) has no medical or other condition that would prevent applicant from performing the acts and duties required of a volunteer, f) has not been convicted of any misdemeanor or felony crime, and g) will comply with all applicable 15th AKF policies and guidelines.

KOREAN FESTIVAL DISCLAIMER

The Hawaii Korean Chamber of Commerce and all of their respective officers, directors, members, agents, representatives, contractors, and employees disclaims any responsibility, obligation, or duty of care to the applicant, and any liability, cause of action, or claim for injury, loss, damages, or expense related to the applicant's participation in the 15th AKF.

WAIVER AND RELEASE

The applicant desires to volunteer in the 15th AKF and understands it may involve physical exertion outdoors, operation of or close proximity to motor vehicles, equipment and machinery, and close proximity to and interaction with the general public. In consideration of being allowed to volunteer in the 15th AKF, and having read and understood the Volunteer Application and Korean Festival Disclaimer above, the applicant or legal guardian (of applicant under 18 years of age) unconditionally waives, releases and holds harmless the Hawaii Korean Chamber of Commerce and all of their respective officers, directors, members, agents, representatives, contractors, and employees from all liability, causes of action, claims, demands, and other proceedings, legal and equitable in nature, which may arise from, or be caused by, or relate in any way to the 15th AKF, including but not limited to any necessary action taken by any of the same for medical or other emergency involving the applicant while volunteering in the 15th AKF.

Applicant's (Or Legal Guardian's) Signature: _____

Dated: _____ Honolulu, HI

Name and Contact Information of Legal Guardian (if applicable):

Name: _____ Phone No.: _____