



# Riding Mountain Challenge September 11-12, 2010

## Volunteer Commitment Form

Please return this form to: Unit B1, 101-1st Ave N.W. | Dauphin, MB | R7N 1G8  
OR fax to: (204) 622-2949

Please phone (204) 622-2941 if you have any questions or are unable to volunteer this year.

Name \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

Postal Code \_\_\_\_\_

Phone (day) \_\_\_\_\_

Phone (cell/evening) \_\_\_\_\_

E-mail \_\_\_\_\_

*By providing your e-mail you give permission for the MS Society to contact you via e-mail. This will help the MS Society reduce the amount of paper distributed and mailing costs.*

To ensure your safety, list any mobility or health issues that would factor into your placement.  
\_\_\_\_\_  
\_\_\_\_\_

I require a temporary park pass for  
(check all that apply):

- Friday
- Saturday
- Sunday

License Plate # \_\_\_\_\_

*Note: If this changes please contact the Parkland Chapter Office prior to August 15th.*

- I require a lunch on Saturday
- I plan to attend to the Saturday Social

Please review the categories and areas in which we require volunteer talent and select the position you prefer. If the position you have selected is not available we will contact you to make other arrangements.

- Banking
- Bike Compound
- Check In
- First Aid (must be certified)
- Food Services Rec. Complex (Dauphin)
- Food Services Danceland (Clear Lake)
- Luggage (valid class 4 driver's license required)
- Parking
- Participant Services
- Photography
- Rest Stop \_\_\_\_\_
- Route Marshall
- Safety & Gear
- Site Set-up / Take down
- Site Support/Maintenance
- T-Shirt Table
- Tour Leader (must be qualified)
- Transportation (valid driver's license required)
- Other \_\_\_\_\_

**WAIVER:** In signing this release, I acknowledge that I understand the intent thereof and hereby agree to absolve and hold harmless the Multiple Sclerosis Society of Canada, corporate sponsors, cooperating organizations and any other parties connected with this event in any way, singly or collectively, from and against any blame and liability for any injury, misadventure, harm, loss, inconvenience or damage suffered or sustained as a result of volunteering for the **Rona MS Bike Tour – RMC 2010** or any activities therewith. I hereby consent to and permit emergency treatment in the event of injury or illness. I also give full permission for the use of my name and photograph in connection with this event.

Signature \_\_\_\_\_