

WALLS OF HONOR - A promise to NEVER forget



September 12 - 16, 2024

VOLUNTEERS

It is anticipated that the Walls of Honor will attract thousands of visitors from all around. To host this memorial, volunteers are needed to accomplish a whole list of tasks including: Site Preparation, Wall Assembly, Security, Parking, Grounds, Assisting Visitors, Transportation, and Tear Down/Clean-Up.

Please Indicate dates and preferred shift available to work each day.
NOTE: Shifts are 4 hours. Please check the times you're available and interested in working.

Day	8 a - Noon	12p- 4 p	4 p- 8 p	8p- 12a	12a 8 a
Pre-Event					
Thurs 9/12					
Fri 9/13					
Sat 9/14					
Sun 9/15					
Mon 9/16					
Tues 9/17					

Registration Form

Applicant Information (Please print clearly)

Name: _____

Address: _____

City, State, Zip: _____

Telephone: Day (____) _____ Cell (____) _____

E-mail: _____

1. Are there any duties (such as lifting) you have been advised not to do? Yes No

If yes, what are your restrictions? _____

2. In case of an emergency, who should we contact?

Name: _____ Number: _____

3. Occupation / Student / Retired: _____

4. T-Shirt Size (Circle One): S M L XL XXL XXXL

HOLD HARMLESS AGREEMENT: In consideration of the Hamburg Enhanced Recreation Organization (H.E.R.O.) permitting participation in the 2024 Moving Wall Event, the applicant hereby agrees to assume all loss, damage, risk and liability associated with participation. It is recognized and acknowledged that this includes, but is not limited to, personal injury and property damage incurred for any reason whatsoever. Applicant further agrees to release, hold harmless and indemnify The Moving Wall, H.E.R.O., Township of Hamburg, any event sponsors, their elected officials, officers, agents and employees from any and all liability or responsibility whatsoever for injury (including death) to persons, and for any damage to any Township property, or the property of others, arising out of, or resulting from, participation in The Moving Wall Visit to Hamburg. By signing below, I am voluntarily taking part in an activity at or in support of H.E.R.O. and The Moving Wall visit. I hereby confirm that the information I have provided is true and may be verified.

Signature: _____ Date: _____

If under age 17, parent or guardian must sign.

Guardian Signature: _____ Date: _____

Please Mail Completed Application To:

H.E.R.O. / THE MOVING WALL VISIT
 P.O. Box 548, Hamburg, MI 48139

h.e.r.o.rec@aol.com

(810) 626-3035

YOUR HELP IS GREATLY

APPRECIATED!!!