

FATHER'S DAY FLY-IN VOLUNTEER REGISTRATION FORM

PERSONAL INFORMATION (Please Print)

Last Name _____ First Name _____

Address _____ City, ZIP _____

Home Phone _____ Work Phone _____

Email _____

Age: ___ 12-17 ___ 18-25 ___ 26-35 ___ 36-50 ___ 50 or better

Emergency Contact Name _____

Relationship _____ Emergency Phone _____

YOU MUST ATTEND ONE OF THE MANDATORY SAFETY MEETINGS

Please select the mandatory safety meeting you anticipate you will attend.

Columbia Airport Administration Conference Room

___ Thursday, June 12, 2025 at 5:00 p.m. ___ Friday, June 13, 2025 at 4:30 p.m.

Pine Mountain Lake Airport (Gregory Hangar)

___ Thursday, June 12, 2025 at 5:00 p.m.

Check your area(s) of interest:

- | | |
|--|---|
| <input type="checkbox"/> Ground & Facilities (set up, take down, clean-up) | <input type="checkbox"/> Kids Area |
| <input type="checkbox"/> Parking – Auto | <input type="checkbox"/> Parking – Aircraft |
| <input type="checkbox"/> Information Booth | <input type="checkbox"/> Admission Gate |
| <input type="checkbox"/> Shuttle/Golf Carts | <input type="checkbox"/> Vendor Support |

What is your area of expertise? _____

Check day(s) and hour(s) you are available:

- ___ Friday, June 13, 2025 SET UP - Time: ___ 8:00 a.m. – 12:00 ___ 12:00 - 5:00 p.m.
___ Saturday, June 14, 2025 - Time: ___ 8:00-12:30, 12:00 –6:00 p.m.
___ Saturday, June 14, 2025 – TAKE DOWN- Time 4:00 p.m. – 6:00 p.m.

WAIVER AND RELEASE AGREEMENT

In consideration for being permitted to volunteer my services to the Tuolumne County Annual Father's Day Fly-in, I hereby agree to accept any and all risks of injury or damage to myself while volunteering my time. I agree that neither Columbia Airport, the Tuolumne County Airports Department, the County of Tuolumne, a political subdivision of the State of California, or other volunteers, shall incur any financial responsibility or liability whatsoever for any injury or damage suffered or incurred by me while volunteering my time and/or equipment on the above stated project. Accordingly, I hereby release each of the foregoing individuals and entities from all actions, claims or demands that my successors, heirs, assigns or I may have for injury or damage suffered or incurred by me due to the work I perform at the Tuolumne County Annual Father's Day Fly-in.

Additionally, I, my successors, heirs and assigns shall be indemnified from liability up to, but shall not exceed, Fifty Thousand Dollars (\$50,000.00), including attorneys fees, that may result due to my actions or work performed at the Columbia Airport on the above mentioned project(s) as long as the work is performed at the request of the Tuolumne County Airports Director and my actions or work performed are within the scope of the request of the Tuolumne County Airports Director.

I HAVE READ THIS AGREEMENT CAREFULLY AND FULLY UNDERSTAND ITS CONTENT. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY, AND SIGN IT OF MY OWN FREE WILL.

Initials: I agree that I will not be under the influence of alcohol or any controlled substance during the event.

DATE: _____

Volunteer Signature

If you are a returning volunteer, please use the Airport Day volunteer shirt.

A Volunteer T-Shirt will be provided. Please indicate your size: S ___ M ___ L ___ XL ___ 2XL ___ 3XL ___

FORM CAN BE RETURNED BY MAIL TO:

TUOLUMNE COUNTY AIRPORTS
10723 AIRPORT ROAD
COLUMBIA, CA 95310

OR BY EMAIL TO:

Traci Williams-O'Neill twilliams@co.tuolumne.ca.us

IF YOU HAVE ANY QUESTIONS PLEASE CALL
(209) 533-5685 OR EMAIL Traci AT THE EMAIL ADDRESS
LISTED ABOVE