

RIDE
TO
FIGHT
CHILDHOOD
CANCER



VOLUNTEER SIGN-UP & RELEASE FORM

WHAT TO DO:

Fill out your personal information; indicate when / what you want to volunteer for. Sign the volunteer release and return form to:

MACC Fund Trek 100
10000 W. Innovation Drive
Suite 135
Milwaukee, WI 53226
Or save it and email it to
ceomoran@maccfund.org

Form is due by May 26, 2017. Volunteers can also register online at trek100.org

VOLUNTEER INFORMATION

Name

Address

City State ZIP

Daytime Phone Evening Phone

Email

T-shirt size: S M L XL XXL XXXL XXXXL

Are you a Trek employee? Yes No

SCHEDULE OF EVENTS

Waterloo June 03, 2017

6-7am	100 Mile / 62 Mile Breakfast
7:30am	100 Mile / 62 Mile Start
8-9am	36 / 19 Mile Breakfast
9:30am	36 / 19 Mile Start
12-6pm	Post-Ride Celebration
5-6pm	Clean Up

VOLUNTEER RELEASE

As a volunteer in the TREK 100 "Ride for Hope" to benefit The MACC Fund, Inc. sponsored by TREK Bicycle Corporation, I know that participation in this event could potentially cause injury. I accept all risks associated with participation in this event. I realize that weather, road and traffic conditions may make this a hazardous event and am competent to handle such conditions.

Understanding the foregoing and in consideration of your accepting my participation, I, my heirs, my personal representative, or anyone entitled to act on my behalf hereby release and discharge event officials; TREK Bicycle Corporation; Midwest Athletes Against Childhood Cancer, Inc.; TREK Wrench Force; and all other sponsors of the event, their agents, representatives and

successors from all claims or liabilities of any kind or nature resulting from, or arising out of, or incident to my participation in this event, even though that liability may arise out of negligence or carelessness on the part of the entities named herein.

In addition, I grant permission to all of the entities named herein to use any photographs, motion pictures, recordings or any other record of this event for any legitimate purpose. I represent that I am of lawful age and legally competent to execute this statement and that before signing it, I have read and understand its contents completely.

Volunteer's Signature Date

Parent or Guardian Signature (Required if under 18 years of age) Date

VOLUNTEER SIGN-UP CONTINUED

I AM AVAILABLE BEFORE THE RIDE

- Set-up crew (Friday before) I'll setup 4am-6am (Saturday)

I AM AVAILABLE TO HELP ON THE DAY OF THE RIDE

6:00AM - 10:00AM	10:00AM - 2:00PM	2:00PM - 6:00PM
<input type="checkbox"/> Set-up / Signage	<input type="checkbox"/> Lunch & refreshments	<input type="checkbox"/> Lunch & refreshments
<input type="checkbox"/> Parking	<input type="checkbox"/> Greeters / Cheering	<input type="checkbox"/> Greeters / Cheering
<input type="checkbox"/> Breakfast <input type="checkbox"/> Water	<input type="checkbox"/> Goody bags	<input type="checkbox"/> Goody bags
<input type="checkbox"/> Starting line	<input type="checkbox"/> Sag vehicle	<input type="checkbox"/> Sag vehicle
<input type="checkbox"/> Sag vehicle	<input type="checkbox"/> Ham radio operator	<input type="checkbox"/> Ham radio operator
<input type="checkbox"/> Ham radio operator	<input type="checkbox"/> Ride marshall (\$45 charge)	<input type="checkbox"/> Ride marshall (\$45 charge)
<input type="checkbox"/> Ride marshall (\$45 charge)	Select route / length	Select route / length
<input type="checkbox"/> 100 <input type="checkbox"/> 62 <input type="checkbox"/> 36 <input type="checkbox"/> 19	<input type="checkbox"/> 100 <input type="checkbox"/> 62 <input type="checkbox"/> 36 <input type="checkbox"/> 19	<input type="checkbox"/> 100 <input type="checkbox"/> 62 <input type="checkbox"/> 36 <input type="checkbox"/> 19
<input type="checkbox"/> Motorcyle patrol	<input type="checkbox"/> Rest stop assistance	<input type="checkbox"/> Rest stop assistance
<input type="checkbox"/> Rest stop assistance	<input type="checkbox"/> Route direction near start / finish	<input type="checkbox"/> Route direction near start / finish
<input type="checkbox"/> Route direction near start / finish	<input type="checkbox"/> Route direction along course	<input type="checkbox"/> Route direction along course
<input type="checkbox"/> Route direction along course	<input type="checkbox"/> Massage therapy	<input type="checkbox"/> Massage therapy
<input type="checkbox"/> I'll help where needed	<input type="checkbox"/> I'll help where needed	<input type="checkbox"/> Clean-up crew
		<input type="checkbox"/> I'll help where needed

MEDICAL PROFESSIONALS — I AM AVAILABLE TO HELP ON THE DAY OF THE RIDE

<input type="checkbox"/> Doctor	<input type="checkbox"/> RN / LPN	<input type="checkbox"/> Nurse's Aide	I am available: <input type="checkbox"/> 6am - 10am <input type="checkbox"/> 10am - 2pm <input type="checkbox"/> 2pm -6pm
<input type="checkbox"/> Physical Therapist	<input type="checkbox"/> Sports Medicine	<input type="checkbox"/> First Aid / CPR	

PAYMENT INFORMATION FOR RIDE MARSHALLS ONLY

Check enclosed payable to "MACC Fund, Inc."
 Charge \$ _____ to the following: AmEx Visa MC Discover

Credit Card #

Expiration Date

Authorized Signature

Security Code

CREDIT CARD SECURITY CODE VISA or MasterCard: The 3-digit security code can be found on the back of your VISA or MasterCard in the signature strip. There will be a 7-digit number. The first 4 digits of this number will match the last 4 digits of your credit card number. The last 3 digits are your security code. American Express: The 4-digit security code for American Express is

printed on the front of the card directly over the last raised digit in your card number. Discover: Not required - leave the field blank. The MACC Fund will not store the credit card information provided by you on this form. Following successful processing, your credit card information will be destroyed.