

**Mule Days Celebration**

**Volunteers**

**Interest & Training**

**Mule Days** appreciates that you're interested in volunteering for our event. We need You! We've put together some general questions for you to answer so that we can match the right person to the right jobs. Please fill out the following questionnaire so that we can get to know you a little better. Thank You!!!

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City, State:** \_\_\_\_\_

**Zip:** \_\_\_\_\_

**Home #:** \_\_\_\_\_ **Cell #:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Tell us a little about yourself. Please answer the questions below as best as you can. If you have any questions you can call us at 760-872-4263 or email us at: [info@muledays.org](mailto:info@muledays.org).**

**Are you familiar with handling large animals, (ex: horses, mules etc.)**\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**What areas of interest do you have? (hobbies, etc)**\_\_\_\_\_

\_\_\_\_\_

Do you enjoy working with the public? \_\_\_\_\_

Do you have any office or clerical experience? \_\_\_\_\_

Can you lift 40 lbs, climb stairs, walk a distance, etc.? \_\_\_\_\_

\_\_\_\_\_

Do you have any construction work experience? (ie: welding, electrical, plumbing, etc.)

\_\_\_\_\_

\_\_\_\_\_

These are some of the volunteer groups that we have. Indicate those groups you may be interested in volunteering for:

Awards: \_\_\_\_\_

Banking/Accounting \_\_\_\_\_

Barns & Stalls: \_\_\_\_\_

Contestant Hospitality \_\_\_\_\_

English Events: \_\_\_\_\_

Event Ticketing: \_\_\_\_\_

Hang Banners: \_\_\_\_\_

Lunches: \_\_\_\_\_

Mule Pen Set Up \_\_\_\_\_ Before the event

Mule Days Office: \_\_\_\_\_

Mule Stall Placards \_\_\_\_\_

Ring Steward/Scribe: \_\_\_\_\_

Radios: \_\_\_\_\_

RV Lots Chairman \_\_\_\_\_

RV Check In/Will Call \_\_\_\_\_

Security: \_\_\_\_\_

Shavings/Sales & Delivery \_\_\_\_\_

Shuttles \_\_\_\_\_

Sponsors: \_\_\_\_\_

Western Events: \_\_\_\_\_

What hours &/or days are you available \_\_\_\_\_

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**VOLUNTEERS ARE NEEDED MAY 1 – JUNE 6.**

Any additional information you may want to add:

If you require a Lot F Dry RV space, please contact the Mule Days

Office at (760) 872-4263.

**RELEASE AND WAIVER OF LIABILITY,  
ASSUMPTION OF RISK AND INDEMNITY AGREEMENT**

**Bishop Mule Days**  
**Description and Location of scheduled event**

**May 2024**  
**Date of event**

In consideration of being permitted to compete, officiate, observe, work for, or participate in any way in the EVENT(s) or being permitted to enter for any purpose and RESTRICTED AREA (defined as any area requiring special authorization, credentials, or permission to enter or any area to which admission by the general public is restricted or prohibited), each of the undersigned, for himself, his personal representatives, heirs, and next of kin:

1. Acknowledges, agrees, and represents that he has or will immediately upon entering any such RESTRICTED AREAS, and will continuously thereafter, inspect the RESTRICTED AREAS which he enters, and he further agrees and warrants that, if at any time he is in or about RESTRICTED AREA and he feels anything to be unsafe, he will immediately advise the officials of such and if necessary will leave the RESTRICTED AREA and/or refuse to participate further in the event(s).
2. HEREBY RELEASES, WAIVES, DISCHARGES AND COVENANTS NOT TO SUE the promoters, participants, racing association, sanctioning organizations or any subdivision thereof, track operators, track owners, officials, car owners, drivers, pit crews, rescue personnel, any persons in any restricted area, promoters, sponsors, advertisers, owners and lessees of premises used to conduct the event(s), premises and event spectators, surveyors, underwriters, consultants and others who give recommendations, directions, or instructions or engage in risk evaluation or loss control activities regarding the premises or event(s) and each of them, their directors, officers, agents, and employees, all for the purposes herein referred to as "releasees", FROM ALL LIABILITY TO THE UNDERSIGNED, his personal representatives, assigns, heirs, next of kin FOR ANY AND ALL LOSS OR DAMAGE, AND ANY CLAIM OR DEMANDS THEREFOR ON ACCOUNT OF INJURY TO THE PERSON OR PROPERTY OR RESULTING IN DEATH OF THE UNDERSIGNED ARISING OUT OF OR RELATED TO THE EVENT(S), WHETHER CAUSED BY THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE.
3. HEREBY AGREES TO INDEMNIFY AND SAVE AND HOLD HARMLESS the Releasees and each of them FROM ANY LOSS, LIABILITY, DAMAGE, OR COST they may incur arising out of or related to the EVENT(S) whether caused by the NEGLIGENCE OF RELEASEES or otherwise.
4. HEREBY ASSUMES FULL RESPONSIBILITY FOR ANY RISK OF BODILY INJURY, DEATH OR PROPERTY DAMAGE arising out of or related to the EVENT(S) whether caused by the NEGLIGENCE OF RELEASEES or otherwise.
5. HEREBY acknowledges that THE ACTIVITIES OF THE EVENT(S) ARE VERY DANGEROUS and involve the risk of serious injury and/or death and/or property damage. Each of THE UNDERSIGNED, also expressly acknowledges that INJURIES RECEIVED MAY BE COMPOUNDED OR INCREASED BY NEGLIGENT RESCUE OPERATIONS OR PROCEDURES OF THE RELEASEES.
6. HEREBY agrees that this Release and Waiver of Liability, Assumption of Risk and Indemnity Agreement extends to all acts of negligence by the releasees, INCLUDING NEGLIGENT RESCUE OPERATIONS and is intended to be as broad and inclusive as is permitted by the laws of the Province or State in which EVENT(S) is/ are conducted and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.
7. **HEREBY acknowledges and agrees I am a non-paid volunteer and understand I am not covered by any Worker's Compensation plan.**

I HAVE READ THIS RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK AND INDEMNITY AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT AND I HAVE SIGNED IT FREELY AND VOLUNTARILY WITHOUT AND INDUCEMENT, ASSURANCE OR GUARANTEE BEING MADE TO ME AND INTEND MY SIGNATURE TO BE COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW.

Print name: \_\_\_\_\_ Signature: \_\_\_\_\_

Address: \_\_\_\_\_

Phone #: \_\_\_\_\_ Email: \_\_\_\_\_

Date: \_\_\_\_\_ Committee: \_\_\_\_\_