



MEMBER INFORMATION:

MEMBER NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

EMAIL: _____ BIRTHDATE: _____

HOME PHONE: _____ WORK PHONE: _____

CELL PHONE: _____ CAN YOU RECEIVE TEXTS? YES NO

EMERGENCY CONTACT INFO:

CONTACT NAME: _____ RELATIONSHIP: _____

HOME PHONE: _____ WORK PHONE: _____

CELL PHONE: _____ CAN THEY RECEIVE TEXTS? YES NO

SKILLS and TRAINING:

Experience with these Computer Programs:

- Microsoft Word None Basic Strong Proficient
- Microsoft Excel None Basic Strong Proficient
- Power Point None Basic Strong Proficient
- Microsoft Access None Basic Strong Proficient
- Adobe Illustrator None Basic Strong Proficient
- Adobe Photoshop None Basic Strong Proficient
- QuickBooks None Basic Strong Proficient
- Word Press None Basic Strong Proficient

List Other Computer Programs you are proficient in below:

Event Committees

Committees you are interested in serving on:

- | | | |
|--|---|---|
| <input type="checkbox"/> Ambassadors | <input type="checkbox"/> Event Coordinator | <input type="checkbox"/> Sponsorship |
| <input type="checkbox"/> Bingo | <input type="checkbox"/> Parade | <input type="checkbox"/> Taste of Woodbury |
| <input type="checkbox"/> Business Fair | <input type="checkbox"/> PR/Marketing | <input type="checkbox"/> Volunteer |
| <input type="checkbox"/> Button of Savings | <input type="checkbox"/> Social Media/Website | <input type="checkbox"/> WDC Board of Directors |

WDC RECIPE FOR SUCCESS:

WDC believes that the recipe to success is for all of us to work together to create a culture that is supportive, dedicated and focused on working hard toward a common goal.

In order to accomplish this it is important to outline the expectations of each of our members. These expectations are outlined below.

COMMITTEE MEMBERS:

To attend quarterly meetings throughout the year (Held the Third Wednesday in January, April, July and October.

To attend weekly meetings held every Wednesday starting 4 weeks prior to the event and also the first Wednesday after the event.

To communicate and cooperate with Board and other Council Members

Help out at the event all three days of the event

Help with the set up and tear down of the event

Be an active participant in discussions of issues/solutions in breakout sessions at our regular meetings

Help with any activities/tasks that are needed or assigned during general council meetings

Read and respond promptly to email communications sent out by the board or other council members

Help in the recruitment of good people to volunteer at the event and to be part of the council

Serve as an active member of the committee you serve on. Attend all committee meetings and complete all tasks that are assigned by the lead of that committee.

CHAIRS and CO-CHAIRS:

In addition to the expectations above...

Responsible to complete or assign others to complete the tasks that are required for the part of the event you are chairing or co-chairing

Report to the Board and Council Members in a timely manner on the progress of how the planning for your part of the event is going

Discuss with the Board or Council Members any issues that arise in respect to your part of the event and to work together to come up with a solution

Update and keep current the Timeline outlining all the duties/deadlines/history of your part of the event

Keep the Board and Council Members informed on any changes in your life that would effect your ability to fulfill your responsibilities as a chair/co-chair

Help recruit and form a committee to manage the part of the event you are chairing or co-chairing

BOARD MEMBERS:

In addition to the expectations above...

Attend all Monthly Board meetings regularly (2nd Wednesday of the month)

Attend any additional/emergency board meetings as needed

Serve as a liaison/committee member for at least one committee for the event (examples include: Parade, Button of Savings or special one time committee like finding a new band)

As requested research and complete projects and/or assignments outside our regular board meeting and report your findings back to the board

I understand and Agree to meet the expectations listed above to the best of my ability.

Council Member Signature: _____ **DATE:** _____

Medical Conditions

List any medical conditions that you think we should know about (optional) :

- Bee Sting Allergy Heart Condition Other _____
- Asthma Food Allergies, list _____
- Diabetic _____
- Epilepsy _____

RELEASE OF LIABILITY & WAIVER AGREEMENT:

In consideration of my participation, I agree that all activities undertaken by me, are at my own risk, and that the Woodbury Days Council, its agents and volunteers, shall not be liable for any claim, demand, injury, damage, action, or causes, of action whatsoever to myself or my property due to the passive or active negligence of the Woodbury Days Council, it's agents, or volunteers, arising out of, connected with my participation in or the use of operation of equipment in this event and that I expressly forever release and discharge Woodbury Days Council, its agents, or volunteers from all such claims, demands, injuries, damages, actions or causes of action whatsoever. I understand that my signature is required before my participation in this event is allowed. I have read this Agreement carefully and know and understand its contents. I agree to participate in the event sponsored by Woodbury Days Council. I understand that participation in the event is completely voluntary. The Woodbury Days event may be photographed, and I may be photographed for the use in promotions without approval or compensation.

I understand and Agree to the terms listed above

Council Member Signature: _____ DATE: _____

SUBMIT COMPLETED APPLICATION BY :

MAIL TO:

Woodbury Days Council
PO Box 25042
Woodbury, MN 55125

OR

EMAIL TO:

Woodbury Days Council
volunteer@woodburydays.com