



## Girls on the Run of Greater Lynchburg Celebration 5K Run/Walk

### Volunteer Interest Form

LAST NAME: \_\_\_\_\_ FIRST NAME: \_\_\_\_\_ M.I. \_\_\_\_\_

HOME ADDRESS: \_\_\_\_\_ T-shirt Size-YL, AS, AM, AL  
(Circle one)

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_ BIRTHDATE: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ WORK PHONE: \_\_\_\_\_

CELL PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

#### PREFERRED METHOD OF CONTACT:

- E-mail  
 Home phone (time of day : \_\_\_\_\_)  
 Work phone (time of day : \_\_\_\_\_)

**Thank you for your willingness to volunteer! We will do our best to allow each person to volunteer according to his/her preference. Please be aware that we assign on a first come, first serve basis.**

#### Preference for a volunteer assignment (mark your top 3 choices):

- \_\_\_ Running Buddy  
\_\_\_ T-shirt/Adelaide Bag Sales  
\_\_\_ Refreshments  
\_\_\_ Clean-Up  
\_\_\_ \*Mile Marker (stationed every ¼ mile on the trail)  
\_\_\_ \*Runner Check-In  
\_\_\_ \*Water Table (located at the 1 mile mark)

\*(You must arrive by 7:30 a.m. If you arrive after this time, someone will take your place.)

- \_\_\_ Set-Up (must arrive early, at least one hour prior to race start time)  
\_\_\_ Run Logistics (assist Riverside Runners at the finish line)

*Please return to:*

Alissa Keith, Volunteer Coordinator  
Girls on the Run of Greater Lynchburg  
922 Main Street, Ste. #1, Lynchburg, VA 24504-1608  
(434)942-4937, [alissa.rene@gmail.com](mailto:alissa.rene@gmail.com)

**Thank you for your interest in GOTR!**

Would you be interested in volunteering at a Girls on the Run location once or twice a week throughout the fall or spring season? If so, let us know!

# CAROLINA CONNECTIONS, INC

MOUNT AIRY, N.C. 27030

PHONE: 336-786-7030 FAX: 336-786-7033

## GIRLS ON THE RUN RELEASE FORM

I hereby authorize Carolina Connections, Inc., Girls on the Run of Greater Lynchburg, and its agents to conduct a comprehensive review of my background causing a consumer report, MVR, criminal history and other reports as deemed necessary by Girls on the Run International. I understand that the scope of the consumer report/investigative consumer report may include but is not limited to verification of social security number; current and previous addresses; employment history; education; character references; criminal history for all jurisdictions; motor vehicle records; drug screening; and all other public documents required. I further authorize any individual, company, firm, corporation or public agency to divulge any and all information, verbal or written, pertaining to me to Carolina Connections, Inc. for Girls on the Run International. and its agents. I further understand as long as I remain a volunteer for Girls on the Run International, this agreement will be binding.

I hereby release Carolina Connections Inc., and its agents, officials, representatives or assigned agencies, including officers, employees or related personnel both individually and collectively, from any and all liability for damages of whatever kind, which may, at any time result to me, my heirs, family, or associates because of compliance with this authorization and request release.

## **REQUIRED DATA** – Please print clearly

Full Name: \_\_\_\_\_  
Last First Middle

Maiden/Other: \_\_\_\_\_ Dates Used: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Present Address: \_\_\_\_\_  
Street City State Zip

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Please mail this form and \$10.00 to offset the cost of the Background Check to:**

**Girls on the Run of Greater Lynchburg,  
922 Main Street, Suite #1  
Lynchburg, VA 24504-1608**

**THANK YOU FOR HELPING US TO KEEP OUR GIRLS SAFE!**