



# Volunteer Opportunity

## General Application

The mission of the Hawaii Bicycling League is to enable more people to ride bicycles for health, recreation, and transportation through advocacy, education, and events.

### Complete & Return:

Hawaii Bicycling League  
 Attn: Volunteer Coordinator  
 3442 Waiālae Ave, Ste 1  
 Honolulu, HI 96816

Email: bicycle@hbl.org

#### HBL Principles

We encourage and respect all levels of riders.  
 We practice and communicate safe and lawful riding.  
 We believe in sharing the roads with all commuters: motorists, cyclists and pedestrians.  
 We are bicycle ambassadors representing the cycling community whenever we ride.

### General Information

<b>Name:</b>	
<b>Gender:</b> Female Male	<b>Birthdate:</b>
<b>E-mail Address:</b>	<b>Adult Shirt Size:</b> XS S M L XL XXL XXXL
<b>Mobile Phone:</b> ( )	<b>Home Phone:</b> ( )
<b>Street Address 1:</b>	
<b>Street Address 2:</b>	
<b>City, State:</b>	<b>Zip code:</b>
<b>Emergency Contact:</b>	<b>Emergency Phone:</b>

### More About You

<b>Medically Fit For Task:</b> Yes No	<b>Health Insurance:</b> ___ Yes, I am currently insured. ___ No
<b>Able to Lift:</b> 0 lbs 10 lbs 25 lbs 50 lbs	<b>Dietary Needs:</b>
<b>Medical Limitation/s:</b>	
<b>Top 3 Skills:</b> 1.	
2.	
3.	
<b>Commitment:</b> ___ Once ___ 1 Month ___ 3 Months ___ 6 Months ___ 1 Year	
<b>Availability:</b> ___ Mon ___ Tue ___ Wed ___ Thr ___ Fri ___ Sat ___ Sun ___ No preference	
<b>Preferred Time:</b> AM PM	<b>Hours per week:</b>
<b>Area/s of Interest:</b> <input type="checkbox"/> Advocacy <input type="checkbox"/> Homeless Outreach <input type="checkbox"/> Ride Leader / Ride Assistant <input type="checkbox"/> Bike Valet Service <input type="checkbox"/> Marketing/Media/Web <input type="checkbox"/> Safety <input type="checkbox"/> Bike-Light Pop-Up Installation <input type="checkbox"/> Medical Support <input type="checkbox"/> Tabling Events <input type="checkbox"/> Certified Instructor Training (LCI) <input type="checkbox"/> Office Hero <input type="checkbox"/> Video Production <input type="checkbox"/> Education <input type="checkbox"/> Pedestrian Crosswalk Installation <input type="checkbox"/> Youth Bike Rodeo <input type="checkbox"/> Event Leader <input type="checkbox"/> Speaker <input type="checkbox"/>	
<b>Comments:</b>	

### Release, Waiver of Liability, Assumption of Risk and Indemnity Agreement

**PERSONAL RESPONSIBILITY AND ACCEPTANCE OF RISKS.** I understand, agree and represent (for myself, assigns, heirs, personal representative, and next of kin) that: I am volunteering to assist the Hawaii Bicycling League in its activities including but not limited to: bicycle rides, cleanups, community outreach, advocacy work, and educational pursuits.  
**RELEASE OF OTHERS AND INDEMNIFICATION:** Knowing these facts, I hereby waive, release, discharge and agree to hold harmless the Hawaii Bicycling League, its agents, employees or anyone acting for or on its behalf from any and all claims of liability for personal injury, death or property damage of any kind or nature whatsoever arising out of or in the course of my participating in any Hawaii Bicycling League events. This release and waiver extends to all claims of every kind of nature whatsoever, foreseen or unforeseen, known or unknown and binds myself, my heirs, executors, administrators or anyone else who might claim on my behalf.  
**PHOTOGRAPHY.** I provide the Hawaii Bicycling League permission for free use of name, voice, picture, video in news and advertising.  
**FOR MINORS (UNDER 18 YEARS).** I am the parent/legal guardian of the minor. An adult will accompany minors under 15 years.

**Signature of Volunteer:**

Required for any one under 18 years. **Signature of Parent/Guardian:**

**Date:**