



# TOWN of GENOA

SINCE 1851

## 2024 VOLUNTEER FORM

Thank you for your interest in volunteering for the Town of Genoa. We are grateful for your willingness to support the Town and appreciate your time and contributions.

Please complete the form and return it to the Town of Genoa office:

Mail: PO Box 14, Genoa, NV 89411

Email: [genoamanager@douglasnv.us](mailto:genoamanager@douglasnv.us)

In Person: 2289 Main Street, Genoa, NV 89411

Name: \_\_\_\_\_ Email: \_\_\_\_\_

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

Preferred Phone: \_\_\_\_\_ Secondary Phone: \_\_\_\_\_

Emergency  
Contact: \_\_\_\_\_

Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

I am interested in volunteering for (check all that apply):

☐ Town of Genoa Events (including Candy Dance)

☐ Genoa Candy Dance

☐ Candy Making for Candy Dance **Only**

I am interested in being an Event Committee Chair

☐ YES

☐ NO

I am interested in being a County Approved Money Handling Volunteer

☐ YES

☐ NO

If yes, please list:

\_\_\_\_\_  
\_\_\_\_\_

### HOLD HARMLESS AND RELEASE:

In consideration of volunteering in any event on Town property, I hereby release and forever discharge the Town of Genoa, Douglas County, its officers, agents, employees, and representatives, and their respective heirs, successors and assigns, from any and all actions, causes of action, suits, proceedings, debts, dues, contracts, judgments, damages, claims, or loss of applicant's or group's property and/or equipment and/or demands whatsoever in law or equity that the undersigned, its successors or assigns, ever had, now have, or may have in the future in connection with the undersigned's participation in any event on Town property.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date