

PO Box 459, Snoqualmie, WA 98065 425-623-4861 cristy@trainmuseum.org

VOLUNTEER APPLICATION: Minor Child

Today's Date	
Name:	
Birth Date —————	-
Parent or Guardian's name: ———	
Relationship	
Home phone	Cell phone
Email	
Mailing Address	
City:	
Zip Code:	
	RELEASE
hold the Northwest Railway Associat and members harmless from any and kind and nature if I am injured or incu	g my time to the Northwest Railway Museum, I agree to ion, its officers, trustees, employees, volunteers, agents d all claims, demands, liability, loss, and damages of any arr any physical impairment or sickness as a result of any or under the guise of volunteering at or for, the Northwest
Signature	Date
If volunteer is under 18 years of age,	signature of parent or guardian is required:
Signature	Date