



# RATPOD 2022 - VOLUNTEER FORM

Thank you for your interest in volunteering for this year's RATPOD event.  
This event would not be possible without the assistance of our fabulous volunteers!

**RATPOD will take place in Dillon, MT on Saturday, June 25, 2022**

**Volunteer and rider check-in, plus a volunteer meeting, will take place the evening of Friday, June 25**

**In exchange for your time, we are happy to provide you with meals both Friday and Saturday evenings (as well as access to food stops along the route), and an official RATPOD t-shirt.**

*Accommodations for volunteers are in UM-Western dorms unless other arrangements are made.*

*If you need a place to stay while in Dillon, please note that below.*

*If you are able to arrange for your own accommodations, you're welcome to do so and please know we appreciate it!*

**To officially commit as a volunteer for RATPOD 2022, please complete this form and return it to Courtney Imhoff at:**

Camp Mak-A-Dream / RATPOD Ride / P.O. Box 1450 / Missoula, MT 59806

E-mail: Courtney Imhoff, [courtney@campdream.org](mailto:courtney@campdream.org) / Fax: (406) 549-5933 / Phone: (406) 549-5987

*Couples ~ please feel free to complete ONE form with information for both of you.*

Name(s): \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
 # of years volunteering: \_\_\_\_\_

T-Shirt size (select one per volunteer):      S      M      L      XL      2X      3X

**Do you plan to attend the festivities?**

**FRIDAY DINNER (Fri. night):**      YES / NO      **BBQ (Sat. night):**      YES / NO  
*Location TBD*      *UM-Western in Dillon, MT (5:00-8:30 pm)*

**Do you need lodging in Dillon?**      YES / NO      *If yes, circle the size / nights needed below.*  
 Single / Double Friday / Saturday

**Volunteer Station / Activity:** Please CHECK the duty and CIRCLE shift (if applicable) you prefer.  
*We have many needs and will do our best to accommodate your request(s), but truly appreciate flexibility.*

- At Event in Dillon** (if multiple shift options are shown, please circle which is your preference):
- \_\_\_\_\_ Rider & Volunteer Check-in (*Friday 3-7:00 pm*)
  - \_\_\_\_\_ Start/Finish Line – Rider # Checker (*Early AM / Late AM-Early Afternoon / Late Afternoon-Evening*)
  - \_\_\_\_\_ UM campus (*Saturday during ride*) – various tasks as needed (signs, souvenir sales, errands, etc)
  - \_\_\_\_\_ Motorcycle Support (*HOG member / Gold Wing rider*) **Are you willing to support the 62-mile route YES / NO**
  - \_\_\_\_\_ Mechanical / Bike Support **Are you willing to support the 62-mile route YES / NO**
  - \_\_\_\_\_ Medical Support **Are you willing to support the new 62-mile route YES / NO**
  - \_\_\_\_\_ Ham Radio
  - \_\_\_\_\_ Sag Wagon driver
  - \_\_\_\_\_ Photography / Video
  - \_\_\_\_\_ Post-ride BBQ festivities – various tasks (staging / beer service / rider clothing drop / clean-up / misc.)

**Standard Route Food / Water Stops:** (*Returning volunteers will be placed at these locations first, others will be used as needed*)

- \_\_\_\_\_ #1 - Water (Scenic Byway turn-off)      \_\_\_\_\_ #4 – Water/Melon (Melrose–Sportsman Motel)
- \_\_\_\_\_ #2 – Breakfast (Polaris – High Country Lodge)      \_\_\_\_\_ # 5 - Pie/ice cream (Glen- Willis Station)
- \_\_\_\_\_ #3 – Lunch (Wise River – Wise River Mercantile)

**Standard Route Food / Water Stops:** (*Food/water stop locations may alter slightly with new route*)

- \_\_\_\_\_ #1 - Water (Pennington Road Turnoff)      \_\_\_\_\_ #2 – Lunch (Notch Bottom Fishing Access)

**Pre-Event / Other:**

- \_\_\_\_\_ Pre-Ride Preparations / Rider & Volunteer Packet Assembly (in Missoula office-week before ride)
- \_\_\_\_\_ Transport supplies from Missoula / Butte to Dillon (or after event, Dillon to Missoula / Butte)

## PHOTO AND INFORMATION RELEASE

The undersigned gives Camp Mak-A-Dream permission to photograph and use pictures or visual and audio recordings of event volunteers in professional and fundraising and/or marketing activities. On occasion, with this permission, event volunteer photographs may be included in a bulletin board, video, website(s), newsletter, camp album, or in personal photographs. The camp respects the privacy of its volunteers and does not share photos with outside entities except for promotional reasons.

In addition, by signing below, the undersigned gives Camp Mak-A-Dream the permission to give my contact information to groups or individuals wishing to support Camp Mak-A-Dream by sending them an invitation to an event or by sending information related to camp. This **will not** be a list sold or given to anyone else for any other reason.

## RELEASE OF LIABILITY

The undersigned understands that occasionally accidents occur during camp events and activities and that participants and volunteers may sustain serious personal injury and property damages as a consequence thereof. Knowing the risks of camp events and activities, nevertheless, and in consideration of the volunteer's acceptance for participation at such a camp event, the undersigned hereby agrees to assume those risks and to hold harmless the Children's Oncology Camp Foundation, and all camp agents, representatives, employees, and volunteers, from any and all liability, claims for personal injury and/or property damage, costs, expenses, and damages arising out of or connected in any way with the participant's participation in camp activities. Further, the undersigned acknowledges that Camp Mak-A-Dream accepts no responsibility for the loss, damage, or theft of personal property.

Unless otherwise agreed to in writing, Camp Mak-A-Dream is not responsible for ANY costs or expenses incurred during the participant's stay, including, but not limited to, travel expenses, medical/hospital expenses, or other needed supplies or services.

Camp and the RATPOD Committee has put in place measures intended to reduce the spread of COVID-19. I agree to comply, with all COVID-19 safety protocols required by the CDC, Camp Mak-A-Dream and RATPOD as a condition of my participation in this event. Compliance with the guidelines minimizes the risk of exposure to COVID-19 but cannot eliminate the potential for exposure. If any participant has a compromised immune system or is in any way considered to be at higher risk for contracting COVID-19 we recommend that the participant not participate in this event at this time. By signing this agreement I acknowledge the contagious nature of COVID-19 and voluntarily assume all risk that I may be exposed to or infected by COVID-19 by participation in RATPOD.

X \_\_\_\_\_  
Volunteer Applicant Signature Date

\_\_\_\_\_  
Volunteer Applicant Printed Name

X \_\_\_\_\_  
Volunteer Applicant Signature Date

