Board of Directors

Application Form

Personal Information

- **Full Name:** _____
- **Address:** _____
- **City, State, Zip Code:** _____
- **Phone Number:** _____
- **Email Address:** _____
- **LinkedIn Profile (if applicable):** _____

Professional Background

Current Occupation

- **Job Title:** _____
- **Company/Organization:** _____
- **Years in Position:** _____
- **Primary Responsibilities:**_____
  _____
  _____

Previous Experience

- **Job Title:** _____
- **Company/Organization:** _____
- **Years in Position:** _____
- **Primary Responsibilities:**
- _____
- _____
- _____
- _____
- _____
- **Job Title:** _____
- **Company/Organization:** _____
- **Years in Position:** _____
- **Primary Responsibilities:**

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Educational Background

- **Degree(s) Obtained: _____**
- **Institution(s) Attended: _____ _____**
- **Year(s) of Graduation: _____**

Skills and Expertise

Please highlight any relevant skills and expertise that would contribute to your role on the board:

Board Experience

If applicable, list any previous board or committee experience:

- **Organization: _____**
- **Position: _____**
- **Terms: _____**

Contributions:

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- **Organization: _____**
- **Position: _____**
- **Terms: _____**

Contributions:

Motivation and Goals

Why are you interested in joining the V.N.H.M.’s board of directors?

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Do you have any goals you hope to achieve during your term?

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Additional Information

Please include any additional information or comments that you believe are relevant to your application:

Signature: _____
Date: _____

Release of Liability Form

For Flashlight Tour Participation

Participant Information

Please provide the following information:

- **Full Name:** _____
- **Address:** _____
- **City:** _____
- **State:** _____
- **Zip Code:** _____
- **Phone Number:** _____
- **Email Address:** _____
- **Emergency Contact Name:** _____
- **Emergency Contact Phone Number:** _____

Acknowledgment of Risks

I understand that participation in the Flashlight Tour involves certain inherent risks, including but not limited to:

- Walking in dark or dimly lit areas.
- Uneven terrain and potential tripping hazards.
- Exposure to natural elements, including weather conditions and wildlife.
- Potential encounters with obstacles or structures.
- Equipment malfunction (flashlights, etc.).

I acknowledge that these risks may result in personal injury, property damage, or other losses. I am voluntarily participating in the Flashlight Tour with full knowledge of these risks.

Waiver of Liability

In consideration of being permitted to participate in the Flashlight Tour, I, for myself, my heirs, executors, administrators, and assigns, hereby release, waive, discharge, and covenant not to sue The Vallejo Naval and Historical Museum, its officers, directors, employees, agents, and volunteers (collectively, "Releasees"), from any and all liability, claims, demands, actions, and causes of action whatsoever arising out of or related to any loss, damage, or injury, including death, that may be sustained by me, or to any property belonging to me, whether caused by the negligence of the Releasees or otherwise, while participating in the Flashlight Tour.

This release includes, but is not limited to, any claims based on the Releasees' alleged negligence in the design, maintenance, or operation of the Flashlight Tour, or in the selection, supervision, or instruction of participants.

I further agree to indemnify and hold harmless the Releasees from any loss, liability, damage, or costs, including court costs and attorney's fees, that they may incur due to my participation in the Flashlight Tour, whether caused by my negligence or otherwise.

Signature

I have carefully read this Release of Liability and fully understand its contents. I am signing this release voluntarily and with the intention of being legally bound.

Signature_____

Printed Name_____

Date_____

Please note: If the participant is under 18 years of age, a parent or legal guardian must sign this release on their behalf.

_____Signature of Parent/Guardian (if participant is under 18)

_____Printed Name of Parent/Guardian