



*PREFERRED ROLE in the South African Solar Challenge 2016*

- OBSERVER**  
(Whole race)
  **SCRUTINEER or ASSISTANT**  
(Gauteng- Pretoria area)
  **GENERAL DUTIES**  
(Can specify cities)
  **Local Mentors**  
(Can specify cities) duties will start before the event

If you would like your duties to be **constrained** to or near particular cities, please indicate which of the follow cities: (Pretoria, Kroonstad, Bloemfontein, Gariep Dam, Graaff-Reinet, Port Elizabeth, Sedgefield, Swellendam, Cape Town) **Keep in mind that this may limit the duties or tasks that can be allocated to you.**

*Constraints*

(Please include date or time constraints, medical conditions or physical limitations you may have.)

DO YOU HOLD A VALID SENIOR FIRST AID CERTIFICATE

YES

NO

Expiry date of the certificate (YYYY-MM-DD) \_\_\_\_\_

DO YOU HOLD A VALID SOUTH AFRICAN DRIVERS LICENSE, OR A INTERNATIONAL DRIVERS LICENSE VALID IN SOUTH AFRICA.

YES  
(Code)

NO

Please indicate the sizes of the following

Shirt (S, M, L, XL, XL)

Hat (57cm, 59cm, 61cm)

**Emergency Contact**

Full Name \_\_\_\_\_

Telephone \_\_\_\_\_

Relationship \_\_\_\_\_

Cell phone \_\_\_\_\_

Email \_\_\_\_\_

**The Organisers shall not be held liable to any Volunteer for any delay or cancellation of the Event or any part thereof.**

Acceptance of this offer to Volunteer, is subject to the acceptance to final ratification from the Event Organisers, this will be in writing and will be confirm on or before the 1<sup>st</sup> May 2016. By signing this agreement, you agree that the information provided is accurate and that you are 18 Years of age or older. The Organisers will not be responsible to pay any of the Volunteers expenses in getting to and from the event itself (Start and Finish).

By signing this agreement you confirm that you are over 18 years of age and that you will not hold the organizers liable for any mishap or injury. If you are younger than 21 years, you also need the signature of a guardian or parent.

Signed ..... Print name .....

Dated the year of ..... On the ..... day of .....

**If under the age of 21, please provide the details of a Guardian**

Guardian / Parent ..... Print name .....

Telephone Number ..... ID .....

