

Bristol Fourth of July Committee
Membership Application

Name _____ Address _____
City _____ State and Zip Code _____
Home Phone _____ Work Phone _____
Cell Phone _____ Email _____
Hobbies/Interests _____
DOB (Day/Month Only) _____

Membership
(Please check one)

I wish to submit my name for consideration as a: Full Membership Associate Membership Volunteer

(Please check one) Full Member Sponsor Name _____

Please submit my name for consideration for the period beginning: August 1, 2011 December 1, 2011

Code of Ethics

Members of the Fourth of July Committee, volunteers, individuals, organizations and vendors participating in the Annual Fourth of July Celebration shall abide by the following Code of Ethics. 1) Members shall be law-abiding citizens of the Town of Bristol and the State of Rhode Island; 2) No member of the Committee shall use his/her position solely as a means for personal monetary gain; 3) Decisions of the Committee shall be made without regard to race, sex, creed, color, national origin, or health of individuals concerned; 4) Volunteers who are members of the Committee are expected to meet the same standards with regard to respecting an individual's rights and shall not use their position to discriminate against any person participating in the Celebration; 5) Individuals/organizations/vendors participating in the Celebration are expected to meet the same standards as previously mentioned, with the exception of monetary profit. Monetary profit is contingent on approval by the appropriate subcommittee and the contract.

I have read and understand the Code of Ethics

Name _____ Date _____

Waiver – Associate Members and Volunteers

I hereby release the Bristol Fourth of July Committee and the Town of Bristol and all of their agents from all claims, demands and actions now existing and hereafter arising related to or connected with any occurrence, act or failure to act during any and all 2010 Bristol Fourth of July Committee events.

I understand that by signing this document, I waive all rights against the Bristol Fourth of July Committee and the Town of Bristol.

I have read and understand the Waiver

Name _____ Date _____

*****Please mail completed application to c/o Membership Subcommittee, PO 561 Bristol RI 02809.**