

# VOLUNTEER APPLICATION FORM



Registration forms must be completed for each individual volunteer. We will do our best to schedule volunteers in their preferred position but this will not always be possible.

Event date: \_\_\_\_\_

## CONTACT INFORMATION

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ POSTAL CODE: \_\_\_\_\_

PHONE: \_\_\_\_\_ EMAIL ADDRESS: \_\_\_\_\_

## EMERGENCY CONTACT INFORMATION

NAME: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_

## VOLUNTEER POSITION

Please tick those areas of interest and indicate 1<sup>st</sup>, 2<sup>nd</sup> and 3<sup>rd</sup> choice.

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Set-up                 | <input type="checkbox"/> First Aid Tent        | <input type="checkbox"/> Registration                      |
| <input type="checkbox"/> Assistant Co-ordinator | <input type="checkbox"/> Water Station         | <input type="checkbox"/> Event Support                     |
| <input type="checkbox"/> Parking Assistant      | <input type="checkbox"/> Trash/Recycle Station | <input type="checkbox"/> Master of Ceremonies<br>Assistant |
| <input type="checkbox"/> Volunteer Tent         | <input type="checkbox"/> Photographer          | <input type="checkbox"/> Medals                            |
| <input type="checkbox"/> VIP Tent               | <input type="checkbox"/> Take down             |  |

1<sup>st</sup> Choice: \_\_\_\_\_ 2<sup>nd</sup> Choice: \_\_\_\_\_

3<sup>rd</sup> Choice: \_\_\_\_\_

**T-Shirt Size (Please Tick One)**  Small  Medium  Large

I will adhere by the guidelines and policies of Caribbean Heritage Sports competition (this can be found in the Volunteer Handbook).

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Youth (Parent/Guardian): \_\_\_\_\_