



Volunteer Application Form

Personal Information (please print)

First Name _____		Last Name _____	
Street Address _____			Apt# _____
City _____		Province _____	Postal Code _____
Phone Number – () _____		E-mail Address _____	
I would prefer you to contact me via: _____			
I am (circle one):			
A Student	Employed	Retired	Seeking work
			Other: _____
Occupation _____			
Contact in case of emergency: Name _____		Phone# _____	
Allergies _____			

Can we send all written communication to you via email? (Please Circle) Yes No

I am interested in the following position and am available to volunteer at the following times:

- Stellar Stuffers and Amazing Assemblers

<input type="checkbox"/> Friday May 2, 2008	<input type="checkbox"/> 8am-12pm	<input type="checkbox"/> 1pm-5:pm	<input type="checkbox"/> 6pm-8pm
<input type="checkbox"/> Saturday May 3, 2008	<input type="checkbox"/> 8am-12pm	<input type="checkbox"/> 1pm-5:pm	<input type="checkbox"/> 6pm-8pm
<input type="checkbox"/> Sunday May 4, 2008	<input type="checkbox"/> 8am-12pm	<input type="checkbox"/> 1pm-5:pm	<input type="checkbox"/> 6pm-8pm

- Gracious Greeters and Food Distributors

<input type="checkbox"/> Monday May 5, 2008 – BBQ Tent	<input type="checkbox"/> 11am-3pm
<input type="checkbox"/> Tuesday May 6, 2008 - BBQ Tent	<input type="checkbox"/> 11am-3pm
<input type="checkbox"/> Tuesday May 6, 2008 – Gracious Greeters	<input type="checkbox"/> 9am-11:30am <input type="checkbox"/> 12pm-2:30pm

- Ontario Technological Skills Competition – Setup/Tear down Crew

<input type="checkbox"/> Thursday May 1, 2008	<input type="checkbox"/> 8am-12pm	<input type="checkbox"/> 1pm-5:pm	<input type="checkbox"/> 6pm-8pm
<input type="checkbox"/> Friday May 2, 2008	<input type="checkbox"/> 8am-12pm	<input type="checkbox"/> 1pm-5:pm	<input type="checkbox"/> 6pm-8pm
<input type="checkbox"/> Saturday May 3, 2008	<input type="checkbox"/> 8am-12pm	<input type="checkbox"/> 1pm-5:pm	<input type="checkbox"/> 6pm-8pm
<input type="checkbox"/> Sunday May 4, 2008	<input type="checkbox"/> 8am-12pm	<input type="checkbox"/> 1pm-5:pm	<input type="checkbox"/> 6pm-8pm
<input type="checkbox"/> Monday May 5, 2008			<input type="checkbox"/> 6pm-8pm
<input type="checkbox"/> Tuesday May 6, 2008			<input type="checkbox"/> 6pm-8pm
<input type="checkbox"/> Wednesday May 7	<input type="checkbox"/> 8am-12pm	<input type="checkbox"/> 1pm-5:pm	<input type="checkbox"/> 6pm-8pm
<input type="checkbox"/> Thursday May 8	<input type="checkbox"/> 8am-12pm		

