

VERNON WINTER CARNIVAL VOLUNTEER APPLICATION - 2018

All information will be kept confidential

Name: _____ Age: 15-21 21 – 40 41 or Older

Address: _____

City/Prov./Postal Code: _____

Phone: (_____) _____ Work: (_____) _____

E-Mail: _____ Cell: (_____) _____

Availability Please let us know when you are available to volunteer (days and times). We are in need of volunteers from September – February

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
AM							
PM							

Additional availability notes: _____

Placement Preferences In order to assist us in matching you with the best available volunteer position(s) please indicate which types of volunteer opportunities are of interest. Number your choices in order of interest:

- Office volunteer
- Parade volunteer
- Jopo/Jopette
- Deliveries (Posters, Brochures, Buttons)
- Judging
- Preparing Gift Baskets/Basket delivery
- Mall volunteer (selling merchandise)
- Carnival Cop
- Receptions
- Celebration of Talent
- Jopohouse Luncheon
- Snow Sculpture Competition
- Silent Auction
- Handyman
- Other

Is there any volunteer position(s) that you would not like or feel you could not do? No Yes

If yes, please explain: _____

Date: _____ Signature: _____

<p>Emergency Contact Information</p> <p>Name: _____ Relationship: _____</p> <p>Phone: (_____) _____ Work: (_____) _____ Cell: (_____) _____</p>
