



VOLUNTEER APPLICATION

PERSONAL DETAILS

Name: _____
Address: _____
Email: _____
Phone: _____
Age: _____ Gender: M / F
Emergency Contact: _____

VOLUNTEER ROLE

Role Preference:

Please list up to five skills, knowledge or abilities you would like to bring to our Festival

Tell us how many hours you would like to volunteer: _____

Which times are you available to volunteer on January 30, 2015

Are you available for additional volunteer hours on January 29, 2015 (for setup)?

If you have any difficulty completing this form please contact either:

carlynn.mcaneley@gmail.com or 124grandmarket@gmail.com

Please scan and email back these forms or arrange to drop them with our wonderful volunteer coordinator Carlynn!