



2008 VOLUNTEER Application

General Info:

Name: _____

Address: _____

Phone: _____

Email: _____

Have you volunteered before? YES NO

If Yes, in which areas? _____

Do you have a valid Driver's License? YES NO

Do you have First Aid training? YES NO

In case of emergency:

Contact name: _____

Relationship: _____

Phone: _____

Do you have any medical conditions we should be aware of? YES NO

If Yes, please specify: _____

How Old Are you?

Over 18

14-18: _____ (please indicate age)



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Volunteer Areas:

Here is a list of areas where volunteers are needed. Please indicate your top 3 choices by writing 1, 2, and 3 in the spaces below:

- | | |
|--------------------------------------|--|
| _____ Event Set Up/Take Down | _____ Performer/Volunteer Hospitality |
| _____ Parking | _____ Floaters (different teams as needed) |
| _____ Security (specify: DAY NIGHT) | _____ Soft Drink Booth |
| _____ Poster hanging | _____ Faery Litter Brigade |
| _____ Merchandise Booth | _____ Front Gate Ticket Taking |

If there is another volunteer position that you wish to apply for, please specify it here:

Please include Two references (name, address phone number):

I promise I will adhere to the Faery Fest Volunteer Code of Ethics, and will fulfill my responsibilities as a Faery Fest Volunteer.

Date: _____ Signature: _____

If you are under 16 years of age, we require the consent of your parent or guardian.

Date: _____ Guardian's Signature: _____
(If required)

The information provided to FaeryFest is for our records and for emergency purposes only. It will remain confidential.

Please send this application by emailing it as an attachment to info@faeryfest.com — or you can mail it to us at:

FaeryFest Vendor Co-ordinators
150 Lee Street, Guelph, Ontario N1E 7E9

Or fax to: 519-824-1403

visit our website at: www.faeryfest.com