

2010 VOLUNTEER APPLICATION
July 31 & August 1, 2 - Hawrelak Park



Return your completed application to:

Wendy- wendy@heritage-festival.com

FAX: 455-9097

Mailing Address: 10125-157 Street, Edmonton, AB T5P 2T9

NAME of Group: _____

ADDRESS: _____

CITY: _____ POSTAL CODE: _____

PHONE: _____ E-MAIL: _____

Group CONTACT (who to contact on your behalf in an emergency)

NAME: _____ RELATIONSHIP: _____

PHONE NUMBER THEY CAN BE REACHED AT DURING THE FESTIVAL: _____

T-SHIRT SIZE: (circle one) S M L XL XXL

WHICH TICKET SELLER AREA ARE YOU WORKING:

FOOD TICKETS: _____ 50/50 TICKETS: _____

What Day/Time are you working (please call Wendy for shift availability)

Saturday: July 31: _____

Sunday: August 1: _____

Monday: August 2: _____

What is the name of your group? _____

What is the name of the person responsible for your group?

_____ Phone Number: _____

Do you have any medical or other condition that we need to consider in your volunteer placement? If yes, please explain:

Age group 15 or under* _____ 16 – 21 _____ 22 – 30 _____ 31 – 55 _____ Over 55 _____

Occupation: _____ Student _____ Retired _____ Unemployed _____