

VOLUNTEER REGISTRATION

FOR OFFICE USE ONLY: Record date: _____ Action _____

NOTE:

New Volunteer

Returning Volunteer

Date: ____/____/2009

NAME: _____ Age: (if under 18) _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: DAY (_____) _____ EVE (_____) _____

BEST TIME TO REACH YOU: _____ EMAIL: _____

OCCUPATION: _____ COMPANY/ORGANIZATION: _____

Check here if you are willing to work BEFORE the celebration.

Check all areas of interest:

- | | | | | |
|--|---|---|------------------------------------|-----------------------------------|
| <input type="checkbox"/> Artists Selection | <input type="checkbox"/> Logistics | <input type="checkbox"/> Sponsors | GENERAL: | |
| <input type="checkbox"/> Button Sales | <input type="checkbox"/> Marketing | <input type="checkbox"/> Site Selection | <input type="checkbox"/> Phones | <input type="checkbox"/> Errands |
| <input type="checkbox"/> Publicity | <input type="checkbox"/> Merchandising | <input type="checkbox"/> Visual Arts | <input type="checkbox"/> Computers | <input type="checkbox"/> Clerical |
| <input type="checkbox"/> Hospitality | <input type="checkbox"/> Community Outreach | <input type="checkbox"/> Construction | <input type="checkbox"/> Lifting | |

Check all time available:

- | | |
|-----------------------------------|---|
| <input type="checkbox"/> Weekdays | <input type="checkbox"/> Weekday Evenings |
| <input type="checkbox"/> Weekends | <input type="checkbox"/> Weekend Evenings |

Check here if you are willing to work DURING the celebration

Check all jobs you are willing to do:

- | | | | |
|---|---|---|---------------------------------------|
| <input type="checkbox"/> Check-in desk | <input type="checkbox"/> Activity Assistant | <input type="checkbox"/> Site Assistant | <input type="checkbox"/> Info Booth |
| <input type="checkbox"/> Souvenir Sales | <input type="checkbox"/> Technical Assist. | <input type="checkbox"/> Barricades | <input type="checkbox"/> Site Manager |

Check all times available (Times below are approximate):

- | | | |
|---|--|---|
| <input type="checkbox"/> 8:30am – 11:30am | <input type="checkbox"/> 11:30am – 2:30pm | <input type="checkbox"/> 2:15pm – 6:15pm |
| <input type="checkbox"/> 6:00pm – 9:00pm | <input type="checkbox"/> 8:45pm – 11:45 pm | <input type="checkbox"/> 10:00pm – 1:00am |

Please check here if you are willing to work the day AFTER First Night.

Check all jobs that you would be willing to do:

- | | | |
|---------------------------------------|--|---------------------------------|
| <input type="checkbox"/> Tear down | <input type="checkbox"/> Clean up | <input type="checkbox"/> Office |
| <input type="checkbox"/> Return Items | <input type="checkbox"/> Other Errands | |

Check all times you are available:

- | | | |
|-----------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> AM | <input type="checkbox"/> PM | <input type="checkbox"/> EVE |
|-----------------------------|-----------------------------|------------------------------|

Referred by: _____

Check here if you wish to be scheduled with a group.

GROUP NAME: _____

CONTACT PERSON _____ PHONE: _____

RETURN FORM TO: FIRST NIGHT MONTEREY. PO BOX 185, Monterey, CA 93942
or FAX this form to 642-9860.

Call 373-4778 with any question. We strongly encourage families and groups to volunteer together.
Please note that anyone 15 years old or younger must be scheduled with a parents or guardian

