



Hornby Festival Volunteer Application FESTIVAL 2011 – July 28 to August 6

**To volunteer, print out, complete and return the following form to the Festival Office to:
Schoolhouse 1-1, Hornby Island, BC, V0R 1Z0, Canada
Tel: 250-335-2734 Email: hornbyfestival@uniserve.com**

PERSONAL INFORMATION

Last Name:	First Name:
Address:	City:
Postal Code:	
Phone (Home):	Phone (Work):
Emergency Contact (Name):	E-mail:
Emergency Number:	

Age: 14-17 18-35 36-54 55+

Do you have any medical conditions or special requirements? Yes No
If yes, describe: _____

VOLUNTEER BACKGROUND

Have you ever volunteered with The Hornby Festival before? Yes No

Volunteer experience: _____

Do you have any relevant skills (First Aid, bartending, production work)? _____

If you have a preference, please note the area(s) in which you would like to volunteer

Co-op Tix Sales <input type="checkbox"/>	Hall Art Show Sit <input type="checkbox"/>	Volunteer Party <input type="checkbox"/>
Parking/Security <input type="checkbox"/>	Bar Ticket Sales <input type="checkbox"/>	Birdhouse Auction <input type="checkbox"/>
Spot Performances <input type="checkbox"/>	Set up (Olsens) <input type="checkbox"/>	Clean up (Olsens) <input type="checkbox"/>
Hall set up <input type="checkbox"/>	Artist Meals <input type="checkbox"/>	Other (specify) _____

Do you have a valid driver's license? No Yes Class: _____

INDICATE AVAILABILITY You will be scheduled within the times you choose. You must volunteer a minimum of 2 shifts.	
Are you available to volunteer before the Festival begins? If so, please indicate when.	

Note: Shift times and volunteer benefits may vary depending on your work area.

Volunteer Waiver: I do hereby release, discharge and agree to hold THE HORNBY FESTIVAL SOCIETY, it's organizers and any and all participating organizations harmless for any and all claims, liabilities, damages, losses, or expenses arising from or caused by any hazard, whether or not covered by insurance, resulting from or related to my volunteer activities with THE HORNBY FESTIVAL SOCIETY

PRINT NAME

SIGNATURE

DATE