

# PODUNK VOLUNTEER APPLICATION

Thanks to your committed efforts we are looking forward to our next fun-filled and best ever bluegrass festival. So, please print out the form below, fill in the information requested and send to C. Roger Moss, Director at 50 Chapman Place, East Hartford, CT 06108 or fax to Roger Moss at 860-282-8239, or e-mail to Roger at [crmoss@ci.east-hartford.ct.us](mailto:crmoss@ci.east-hartford.ct.us). Any volunteer questions or concerns? Call Roger at 860-528-1458.

Remember this form must be on file for each festival volunteer. Applications will be accepted until June 1<sup>st</sup>.

I am volunteering to help at the Podunk Bluegrass Festival. First priority in placement will be given to outstanding volunteers from previous festivals. Volunteers will work a minimum of four (4) four hour shifts for a total minimum of 16 hours. In exchange, you will receive your full festival ticket, a volunteer t-shirt to be worn during all shifts, a meal ticket for each 4 hours worked and the good feeling of meeting new people and working with the other great volunteers.

Flexibility is important! I understand this application must be on file for me to work at the Festival. Every effort will be made to match volunteers with their desired assignments. However, volunteer availability and staffing needs may result in volunteers being offered alternative assignments. The staffing decisions made by the Festival Committee are final.

NAME: (Individuals Only) \_\_\_\_\_

HOME ADDRESS: \_\_\_\_\_

TOWN \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_

This is my \_\_\_\_\_ year volunteering at Podunk. List years: \_\_\_\_\_

Have you volunteered for other festivals? List: \_\_\_\_\_

My shirt size is (circle one)

Areas where I have worked in the past at Podunk : \_\_\_\_\_

I will be arriving at the festival on (circle one):

I would like to help in the following areas (in order of preference):

1: \_\_\_\_\_

2: \_\_\_\_\_

3: \_\_\_\_\_

Other experience or skills you can offer to Podunk: \_\_\_\_\_

\_\_\_\_\_ DATE \_\_\_\_\_

Signature (Parent or Guardian if volunteer is under 18)

**SAVE or PRINT form before exiting. All information will be lost once this page is closed.**