



Volunteer Opportunities and Agreement

Dear Festival of Cheer Volunteer:

Interfaith Community Care thanks you for your support of our event. Following is the information summarizing the volunteer opportunities for our event:

Volunteer Information:

Name: _____ Title: _____

Company/Organization Name: _____

Address: _____ City: _____

State: _____ Zip: _____ Phone: (____) _____

E-Mail: _____ Fax: (____) _____

Other Volunteers within your group:

Name: _____ Name: _____

Name: _____ Name: _____

Name: _____ Name: _____

Name: _____ Name: _____

I/My group would like to volunteer in the following areas:

- | | |
|--|---|
| <input type="checkbox"/> Stuffing event bags the week before the event | <input type="checkbox"/> Taking pictures of Children with Santa |
| <input type="checkbox"/> Help create decorations before the event | <input type="checkbox"/> Assisting with crowd control |
| <input type="checkbox"/> Assisting with event registration | <input type="checkbox"/> Helping with the snow area (must be able to shovel snow) |
| <input type="checkbox"/> Assisting with crowd control | <input type="checkbox"/> Assist with restaurant needs during the event |
| <input type="checkbox"/> Assisting with Tear Down and Clean-Up | <input type="checkbox"/> Ticket booth as people enter/leave |
| <input type="checkbox"/> An Event Runner (Help with event issues) | |

Please visit: www.festivalofcheer.com



I/My group would like to work the following hours:

- 7:00 a.m. – 10:00 a.m.
- 9:00 a.m. – noon
- 10:00 a.m. – 1:00 p.m .
- noon – 3:00 p.m.
- 2:00 p.m. – 5:00 p.m.

Signature: _____ Date: _____

Please fax this completed form to Mary Chou-Thompson at (623) 546-1589.

Notes: Please arrive fifteen minutes prior to your scheduled time for volunteer check-in

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