



TULIP TIME 2010 VOLUNTEER REGISTRATION FORM

238 South River Ave., Holland, MI 49423 (616) 396-4221, ext. 108 FAX (616) 396-4545

Please print or type. All information is strictly confidential. Please feel free to copy this form for anyone who would like to volunteer. This form is also available on our website: www.tuliptime.com. Questions? Contact Sue@tuliptime.com, or call (616)396-4221x108

Name (first) (last)

Address e-mail address

City State Zip

If employed, by whom if student, school Grade

Physical Limitations / Special Needs

Phone Night Day Cell

(Please Circle) Shirt Size: S M L XL XXL Sex: M F Cash register experience? Yes No

Years volunteering at Tulip Time (including this year) Do you have a Dutch Costume? Yes No

DRIVER INFORMATION

If interested in volunteering for a function that requires driving (Festival drivers must be 18 years of age or older) . . . Driver's License # State

SCHEDULING INFORMATION

- Schedule me for any shifts available.
Schedule me for only those times indicated (page 2)
Please call me to discuss schedule &/or opportunities
Please schedule me with

I am interested in the following Festival opportunities in May.

- Office help Security
Dutch Marktplaats Souvenir Sales
Kinderplaats Traffic Control
Art & Craft Fair Stage Crew
Tulipalooza Parade Marshal
PA Announcers Musical Events
Brochure Distribution Operations

Job descriptions available at www.tuliptime.com

Referred by:
We welcome your friends as volunteers!
VOLUNTEERS NEEDED!
Please suggest the names of potential volunteers:
Name: phone no. e-mail

**TEEN VOLUNTEERS**

**Parent or Guardian, please read and sign for teen volunteers under age 18 . . .**

I/we the parent(s) and/or legal guardian(s) of \_\_\_\_\_ understand that \_\_\_\_\_ has volunteered to assist the activities of the TULIP TIME FESTIVAL. I/we consent to my/our child's involvement with the festival and so remise, release and discharge for myself and my child, the TULIP TIME FESTIVAL, INC. each and every officer, director, administrator and employee, of and from all, and all manner of, actions or causes of action, suits, claims and demands whatsoever in law or equity, foreseen or unforeseen, arising out of or in any way connected with my/our child's involvement with the festival's activities. I/we have read and understood the provisions of this general release.

**Parent/legal guardian's signature** \_\_\_\_\_ Date: \_\_\_\_\_

Teacher Recommendation \_\_\_\_\_

**ALL VOLUNTEERS**

**Please read and sign . . .**

As a volunteer, I am not an employee of Tulip Time Festival, Inc., and am not subject to the benefits provided under the laws of Workers Compensation in the State of Michigan. Further, I agree to hold harmless Tulip Time Festival, Inc., its officers, directors, employees and authorized representatives, against any and all claims, losses, injuries (including death and disability), liabilities, damages and expenses of any kind, including attorney fees, with respect to my volunteering for the Tulip Time Festival. I understand that my background may be checked for any criminal history. Tulip Time reserves the right to decline an individuals request to volunteer. All information will be kept confidential.

Signature \_\_\_\_\_ Date \_\_\_\_\_ Date of Birth (month/day/year) required \_\_\_\_\_

**Please use this May 2010 calendar to indicate your availability for the festival.**

SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
					4/30	5/1
5/2	5/3	5/4	5/5	5/6	5/7	5/8
5/9	5/10				<b>IMPORTANT</b> Select the date you wish to volunteer. Write in the starting time of requested shift and function. Please do so for all dates you are available.	<b>EXAMPLE:</b>  <i>Parking</i> 9:00 - 1:00 p.m.

