



TULIP TIME 2008 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

Name _____
(first) (last) (Optional: Date of Birth) Age if under 18

Address _____ e-mail address _____

City _____ State _____ Zip _____

If employed, by whom _____

If student, school _____ Grade _____ Years volunteering at Tulip Time (including this year) _____

NOTE: If volunteering during school hours, a permission note from the school is required releasing you from class.

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

Previous volunteer experience _____ Do you have a Dutch Costume? Yes No

DRIVER INFORMATION

If interested in volunteering for a function that requires driving (Festival drivers must be 21 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 would like to help at *Petal Pops* in June.

_____ I would like to help with brochure distribution

I am interested in the following **Festival** opportunities in May.

_____ Anything _____ Security

_____ Dutch Marktplaats _____ Souvenir Sales

_____ Kinderplaats _____ Traffic Control

_____ Art & Craft Fair _____ Stage Crew

_____ Bier & Muziek Festival _____ Parade Marshal

_____ PA Announcers _____ Musical Events

_____ Tulip Time Run (hospitality /aid station)
Job descriptions available at www.tuliptime.com

Referred by: _____
We welcome your friends as volunteers!

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 _____

Phone Number _____ Date _____

TEACHER RECCOMENDATION _____

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.

Signature _____ Date _____

Please use this May 2008 calendar to indicate your availability for the festival.

SUNDAY MONDAY TUESDAY WEDNESDA THURSDAY FRIDAY SATURDAY
Y

				5/1	5/2	5/3
5/4	5/5	5/6	5/7	5/8	5/9	5/10
5/11	5/12	5/13			IMPORTANT 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.	EXAMPLE: <i>Parking 9:00 - 1:00 p.m.</i>

Volunteer Program
Sponsored by:

