

UNPAID VOLUNTEER APPLICATION



A COPY OF VALID GOVERNMENT ISSUED PHOTO IDENTIFICATION MUST BE SUBMITTED TO COMPLETE THIS APPLICATION. APPLICANTS MUST BE 18 YEARS OF AGE OR OLDER OR SUPERVISED BY AN ADULT WHO IS ALSO AT THE EVENT. **CIVIC GROUPS NEED ONLY SUBMIT ONE APPLICATION WITH MAIN CONTACT PERSONS INFORMATION.**

Contact Information

Name:

Date of Birth:

Street Address:

City, ST ZIP Code:

Cell Phone:

Home Phone:

Person to notify in case of emergency

Name:

Date of Birth:

Street Address:

City, ST ZIP Code:

Cell Phone:

Home Phone:

E-Mail Address:

Please list two character references

Name and phone number

1. _____

2. _____

Special certifications, skills (CPR, medical, etc.):

Spoken languages:

Community affiliations (Clubs, Service Organizations, etc.):

Previous volunteer experience:

List hobbies and skills:

Do you have relatives participating in the event? Yes No If yes, list full name.

Are you able to lift comfortably 40 pounds or more? Yes No

Are you able to stand for extended periods of time? Yes No

Do you have means of transportation to and from events? Yes No

Have you ever been convicted of any felony or crime? Yes No If yes, please explain.

Availability

When are you available for volunteer assignments?

___ : ___ to ___ : ___ Sunday

___ : ___ to ___ : ___ Monday

___ : ___ to ___ : ___ Tuesday

___ : ___ to ___ : ___ Wednesday

___ : ___ to ___ : ___ Thursday

___ : ___ to ___ : ___ Friday

___ : ___ to ___ : ___ Saturday

Events of Interest

In which events are you interested in volunteering for?

___ Taste of Grand Island

___ Gus Macker

___ Taste of Niagara Falls

___ Music & Movie Series

___ Taste of Lockport

___ Concert for a Cure

___ Taste of Lewiston

Other: _____

Role during event

Which roles are you interested in volunteering for?

___ Selling beverages

___ Collecting trash

___ Parking attendant

___ Selling food tickets

___ Scorekeeping

___ Event set up/tear down

Food and Beverage Policy

All volunteers will receive drink and food vouchers for each day that they are volunteering. These vouchers may be turned in at designated vending locations and vouchers must be remitted at the time of food & drink collection. Volunteers are prohibited from drinking alcohol while working the event. Vouchers are distributed at check-in.

Sign-in and Check-in Instructions

Prior to beginning your volunteer shift, you must check in with your volunteer supervisor. Check-ins will take place 30 minutes prior to any event start time. Example. If the event is open to the public at 8am, you must check in at 7:30am OR 30 minutes prior to your start time if beginning your shift after an event as already began. Check-in location for each event will be the beverage concessions tent.

AS A CONDITION OF VOLUNTEERING, I give permission for Corey McGowan Productions to call listed references or verify the character or the applied volunteer. I understand that, if appointed, my position is conditional upon the company receiving no inappropriate information on my background. I hereby release and agree to hold harmless from liability Corey McGowan Productions, the officers, employees and volunteers thereof, or any other person or organization that is associated with any event produced by Corey McGowan Productions. I also understand that, regardless of previous appointments, Corey McGowan Productions is not obligated to appoint me to a volunteer position. If appointed, I understand that, prior to the expiration of my term, I am subject to suspension by Corey McGowan Productions for any violation of company policies or principles.

By participating as a volunteer with Corey McGowan Productions, you will be given a volunteer t-shirt and will be provided with 1-2 meals based on your assigned shifts and will also be provided beverages throughout the entire day. This is an opportunity to support your community through civic responsibility, build your resume, make new friends, be a part of something exciting or fulfill a requirement made by your school or municipality for volunteer service.

Applicant Signature _____ Date _____

If Minor/Parent Signature _____ Date _____

Applicant Name (please print or type) _____

NOTE: Corey McGowan Productions will not discriminate against any person on the basis of race, creed, color, national origin, marital status or gender.

Please submit this application to: corey.mcgowan89@icloud.com