## **TASTE OF MABLETON VOLUNTEER REGISTRATION**

CONTACT DETAILS		
Name		
Address		
Mobile		
Email address		
Preferred method of contact		
Gender	☐ Male ☐ Female ☐ Non-Binary/Other	
Emergency Contact Details:		
Name:		
Relationship to you:		
Best Contact:		
Do you have any special accommodation needs?		
How did you hear about the Taste of Mableton?		

Experience and Availability		
Please check any of these skill areas if they relate to you:		
	Experience in Customer Service / Retail / Hospitality	
	Experience in Technical / Backstage work	
	Experience in Public Health	
	Experience in Event Setups	
	l Experience in Program Management	
	1 Experience in Operations Management	
	Experience as a Performer or Artist	
	Experience working in Public Relations/Marketing / Social Media	
	Experience working at Festivals / Live Events / Community Events	
Other Skills you may believe would be of assistance:		
Please	check any roles you may be interested in undertaking:	
	Welcome / Info Crew	
	Bump-in Crew (Prior or post event)	
	Safety/Security/Traffic Crew	
	Roaming Survey / Info Crew	
	Art/Exhibit Activities	
	Vendor Support	
	ToM Program Activity Support	
	Parade Support	
	Pre-Event Marketing Ambassador	
	1 Wherever Needed	
	<b>note:</b> Roles are filled on an as-needed basis; depending on the number of volunteer applications, you e offered one or multiple of your preferred roles.	

Please	Please indicate your availabilities in the space below		
	ToM Day: All Day		
	ToM Day: 7 am to 12 noon		
	ToM Day: 9 am to 1 pm		
	ToM Day: 11 am to 3 pm		
	ToM Day: 1 pm to 5 pm		
	ToM Day: 4pm to 8 pm		
	ToM Day: Other Times		
	Pre-Event Activities/Committees (Times may Vary depending on requirements)		
<b>Please note:</b> These times are a guide only; final scheduling will be done by the Volunteer Coordinator closer to			
	the event date. Multiple shifts may be offered to each volunteer.		
Privacy statement:  The personal information on this form is being collected to recruit and select volunteers wishing to work as part of the Taste of Mableton. Your information will be held in confidence and will not be shared outside the Mableton Improvement Coalition/Taste of Mableton unless specified under the law.  Please check if you would like to receive E-Newsletters from the Mableton Improvement Coalition.  I attest that the information supplied is true and accurate by signing this form.  I understand that submitting this application form does not automatically register me as a volunteer and that there will be a process of selection and scheduling before an offer is made for available work.  Signature:			
Nam	Date:		
To be	signed by parent/guardian if the participant is under 18 years of age.		
Your signature below indicates that you have read this application form and that your child is consenting to undertake volunteer activities with the Taste of Mableton.			
Guai	rdian Signature:		
Nam	Date:		