



YMCA of
Northeastern Ontario
Sudbury YMCA



Downtown Sudbury Ribfest Volunteer Application Form 2019

Name: _____ Address: _____

City: _____ Postal Code: _____ Phone: _____ Cell: _____

Email: _____ Gender: Male Female Age: 15 -19 20 -39 40 -59 60+

Festival Information

T-Shirt Size Required: S M L XL 2XL 3XL 4XL

Why are you interested in volunteering for the festival (please check off)?

Enjoy helping others Work Experience School/Community Hours To participate in the festival Other (explain): _____

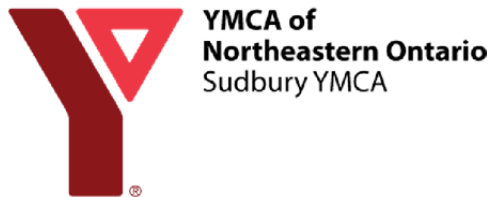
Have you volunteered before: Yes No If yes where:

What did you do? : _____

Are you Smart Served Certified: Yes No Do you have a driver's license?: Yes....

If yes, what Class: _____ No

Do you have any skills, licenses or trade that may be of a benefit to the festival (if so explain):



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Availability

Thursday, August 29th

- Set Up (7:00am-5:00pm)
- VIP Night (5:00pm-9:00pm)

Hours Available: _____

Friday, August 30th (11:00am-11:00pm)

- | | |
|--|---|
| <input type="checkbox"/> Set Up (Starting at 9:00am) | <input type="checkbox"/> Bar (must have Smart Serve) |
| <input type="checkbox"/> Security | <input type="checkbox"/> Pop & Water Sales |
| <input type="checkbox"/> Green Team | <input type="checkbox"/> Hospitality |
| <input type="checkbox"/> Ticket Sales | <input type="checkbox"/> Clean Up Crew (Starting at 9:00pm) |

Hours Available: _____

Saturday, August 31st (11:00am-11:00pm)

- | | |
|---|---|
| <input type="checkbox"/> Set Up (Starting at 9:00am) | <input type="checkbox"/> Pop & Water Sales |
| <input type="checkbox"/> Security | <input type="checkbox"/> Hospitality |
| <input type="checkbox"/> Green Team | <input type="checkbox"/> Clean Up Crew (Starting at 9:00pm) |
| <input type="checkbox"/> Ticket Sales | <input type="checkbox"/> Kids Zone (11:00am-6:00pm) |
| <input type="checkbox"/> Bar (must have Smart Serve) | |

Hours Available: _____

Sunday, September 1st (11:00am-11:00pm)

- | | |
|---|---|
| <input type="checkbox"/> Set Up (Starting at 9:00am) | <input type="checkbox"/> Pop & Water Sales |
| <input type="checkbox"/> Security | <input type="checkbox"/> Hospitality |
| <input type="checkbox"/> Green Team | <input type="checkbox"/> Clean Up Crew (Starting at 5:00pm) |
| <input type="checkbox"/> Ticket Sales | <input type="checkbox"/> Kids Zone (11:00am-6:00pm) |
| <input type="checkbox"/> Bar (must have Smart Serve) | |

Hours Available: _____

***You must read, fill out and sign the waiver on the back of this page.**



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Downtown Sudbury Ribfest Volunteer Agreement & Waiver 2019

This agreement is intended to specify the seriousness with which we treat our volunteers and our commitment to ensuring your volunteer experience is productive and rewarding.

I _____ agree to volunteer for the Downtown Sudbury Ribfest *(please print your name)*

and commit to the following:

1. To perform my volunteer duties to the best of my ability.
2. To meet time and duty commitments.
3. To act responsibly at all times as a member of the Downtown Sudbury Ribfest Volunteer Team.

I grant permission to Downtown Sudbury Ribfest in regards to the use of my name, photo and skills to promote volunteer activities involving Downtown Sudbury Ribfest exclusively.

I fully understand that Downtown Sudbury Ribfest, its organizers, sponsors, promoters, employees and volunteers are not responsible for the loss or damage of any personal property or for any personal injuries sustained during the festival in my capacity as a volunteer.

Downtown Sudbury Ribfest reserves the right to release any volunteer if, in its opinion the volunteer is not adhering to the terms of this agreement.

Volunteer Signature: _____ **Date:(m/d/y)** _____

Parent/Guardian (name required if the volunteer is less than 18 years of age): I (please print name)

Agree to all the conditions and terms as outlined in the 2018 Volunteer Agreement and Waiver as it pertains to the underage volunteer

submitting this application form **Parent/Guardian Signature:** _____ **Date:(m/d/y)** _____

Festival Representative Signature: _____ **Date:(m/d/y)** _____

Contact Information - In Case of an Emergency

Name: _____ Address: _____

City: _____ Province: _____ Postal Code: _____

Phone: _____ Cell: _____ Relationship to Volunteer: _____