

2023 ST. FRANCIS SUMMER CLASSIC VOLUNTEER REGISTRATION FORM

NAME _____

MALE FEMALE

ADDRESS _____

PHONE NUMBER FOR CONTACT _____

EMAIL ADDRESS FOR CONTACT _____

FIRST AID OR SECURITY EXPERIENCE

HAVE YOU COMPLETED DIOCESAN VIRTUS PROGRAM? Y / N

HAVE YOU BEEN VACCINATED FOR COVID-19? Y / N

DAYS OF THE WEEK YOU ARE AVAILABLE

LIST ANY WEEKS YOU ARE NOT AVAILABLE DUE TO VACATION, ETC.

WE WILL CONTACT YOU IF WE HAVE AN OPPORTUNITY FOR YOU