



TURKFEST VOLUNTEER FORM

Contact Information

Name: _____ Phone: _____

Street Address: _____

City: _____ State: _____ ZIP Code: _____

E-Mail Address: _____

Are you 18 years or older? Yes ☐ No ☐

Occupation: _____

Employer Name and Phone Number: _____

Do you have a valid driver's license? Yes ☐ No ☐ # _____

Language(s) Spoken

Person to Notify in Case of Emergency

Name: _____ Relationship: _____

Home#: _____ Work# _____ Cell# _____

Do you have any criminal convictions (Other than parking violations and juvenile offenses?)

Yes ___ No ___ If yes, please describe _____

Agreement and Signature

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as a volunteer, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal.

Name (Printed): _____

Signature: _____ Date: _____

Our Policy

It is the policy of this organization to provide equal opportunities without regard to race, color, religion, national origin, gender, sexual preference, age, or disability.

Thank you for completing this application form and for your interest in volunteering with us.