

Volunteer Sign-Up Form

Name: _____

Phone Number: _____

Alt. Phone Number: _____

Please check the areas that you are interested in working.

_____ **Concessions**

Each family must work a minimum of one shift in concessions, unless they are orange ticket holders.

Shift	May 8 th Time Trials	May 22 nd - BB	June 5 th - VGO
1 st			
2 nd			
3 rd			

_____ **Desk Parent**

Please mark a maximum of three weeks that you would like to volunteer, with #1 being your top choice. You may only choose the age group that your child(ren) swim in.

Girls – Age Group			Boys – Age Group		
	Wk 1	4/26 – 4/30		Wk 1	4/26 – 4/30
	Wk 2	5/3 - 5/7		Wk 2	5/3 - 5/7
	Wk 3	5/10 - 5/14		Wk 3	5/10 - 5/14
	Wk 4	5/17 - 5/20		Wk 4	5/17 - 5/20
	Wk 5	5/24 - 5/28		Wk 5	5/24 - 5/28
	Wk 6	5/31 - 6/4		Wk 6	5/31 - 6/4
	Wk 7	6/7 - 6/11		Wk 7	6/7 - 6/11
	Wk 8	6/14 - 6/18		Wk 8	6/14 - 6/18
	Wk 9	6/21 - 6/25		Wk 9	6/21 - 6/25

_____ **Equipment - All home meets, loading and unloading for away meets and team set up and take down for Divisional Meet.
May 8, 15, 22, & 30, June 5, 12 & 19.**

**** Please turn in this form at the Parent Meeting on April 13th.
All positions will be granted on a first come first serve basis. ****