



GENERAL VOLUNTEER APPLICATION

Contact Information:

First Name: _____ **Last Name:** _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

Phone (Day): () _____ **(Evening):** () _____ **(Mobile):** () _____

E-mail: _____

T-Shirt Size (Unisex): S M L XL XXL **Age:** _____ **Date of Birth:** _____

Are you a student? Yes/No (Please Circle) **School Attending:** _____

Occupation & Employer: _____

Special Talents/Strengths: _____

Which events are you most interested in? (Please check all that apply)

***Shift schedules vary with each event.

- | | | |
|---------------------------------------|--|--|
| <input type="checkbox"/> Archery | <input type="checkbox"/> 7v7 Football | <input type="checkbox"/> Soccer |
| <input type="checkbox"/> Basketball | <input type="checkbox"/> Footgolf | <input type="checkbox"/> Team Handball |
| <input type="checkbox"/> Bowling | <input type="checkbox"/> Golf | <input type="checkbox"/> Volleyball |
| <input type="checkbox"/> Cornhole | <input type="checkbox"/> Gymnastics | <input type="checkbox"/> 5K Road Race |
| <input type="checkbox"/> Cheerleading | <input type="checkbox"/> Lacrosse | <input type="checkbox"/> Other |
| <input type="checkbox"/> Cycling | <input type="checkbox"/> Lawnmower Races | |
| <input type="checkbox"/> Disc Golf | <input type="checkbox"/> 1/2 Marathon | |

PLEASE RETURN COMPLETED APPLICATION TO:

City of Foley Sports Tourism

ATTN: Don Staley, Executive Director of Sports

P.O. Box 1750 Foley, AL 36536

Phone: (251) 923-2111/Fax: (251) 952-4014

dstaley@cityoffoley.org

Connect with us online at FoleySportsTourism.com, on



or

