

VOLUNTEER FORM / PLEASE EMAIL PHOTO ID
TO FLORIDAKHK@GMAIL.COM ALONG WITH THIS FORM.

NAME _____

AGE/ GRADE _____

EMAIL _____

ADDRESS _____

PHONE NUMBER _____

(SOME VOLUNTEER POSITIONS MAY REQUIRE BACKGROUND CHECKS)
YOU WILL BE CONTACTED

EMERGENCY CONTACT INFORMATION

1. _____ NAME

2. _____ NAME

ALLERGIES? _____

WHERE WOULD YOU LIKE TO VOLUNTEER? (CIRCLE ONE OR MORE)

FOOD COURT, TICKET BOOTH, PARKING, SECURITY, EMERGENCY
MANAGEMENT TEAM, SHUTTLE SERVICE (MUST HAVE A LICENSE AND
INSURANCE)