PLEASE PRINT NEATLY CITY OF MANHATTAN BEACH – ARTS FESTIVAL 2008 VOLUNTEER APPLICATION for September 14, 2008

Name (First Last):	Date of Birth:
Address (Street, City, Zip Code):	
E-mail:	
Home Phone Number:	Cell Phone Number:
T-Shirt Size: XS S M	L XL XXL (check one)
Please check below which shift you w Artist Assistant	ould be willing to volunteer for:
·	00 PM) \square Shift B (half day- 12:00 PM – 4:00 PM)
Festival Assistant Shift A (all day- 10:00 AM - 4:0	00 PM) Shift B (half day- 12:00 PM – 4:00 PM)
In Case of Emergency, Who Should We Noti	ify? (Name, Relationship to applicant, phone number)
Physician's Name & Phone:	
Any medical information that we should be awa	are of in case of emergency? (Allergies, medications, etc.)
The below signed agrees to perform volunteer service provided on a voluntary, non-salaried basis, and the any purpose. No employee benefits shall be available	ICE AGREEMENT AND RELEASE the for the City of Manhattan Beach. That all services to the City are below signed shall not be considered an employee of the City of the to the below signed volunteer in connection with the performance on this agreement to enforce the terms, the prevailing party shall
Volunteer Signature	Date
Parent or Guardian if Volunteer is a Minor	Date

Mail this application to: Eve Kelso, Community Programs Supervisor, City of Manhattan Beach, 1400 Highland Avenue Manhattan Beach, CA 90266 or FAX to (310) 802-5401 ATTN: Eve Kelso