

VOLUNTEER APPLICATION & AVAILABILITY

AUGUST 30 & 31, 2014

CITIZENSHIP STATUS IN CANADA

Canadian Citizen

Work Permit

Working Holiday Visa

Student Visa

Other, Please Specify:

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CONTACT INFORMAT	CION											
First Name		Last Name										
Address												
City		Province	Pos									
Date of Birth		Current Sch	chool									
Highest Grade Completed	Home F	Phone	Cell Phone									
Email	ail				How well do you speak English?							
Please check this box to give your consent to receive electronic communications from Nikkei National Museum & Cultural Centre. You may withdraw your consent at any time by contacting: volunteer.nikkeiplace@gmail.com			0 NONE How we	1 Il do you	2 ı speak	3 Japanes	4 se?	5 FLUENT				
EMERGENCY CONTACT			0 NONE	1	2	3	4	5 FLUENT				
Name Phone Number	Relationship)	Why are you interested in volunteering for Nikkei Matsuri?									
Medical Concerns												
REQUIRED IF UNDER THE A	GE OF 19:											
Name of Parent/Guardian			How did you learn about Nikkei Matsuri?									
Phone Number												
Signature of Parent/Guardian												



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PRE-FESTIVAL

Marketing/Promotion

Set Up—1 week prior to the event

Thank you! for your interest in volunteering at Nikkei Matsuri!

Please email or fax this completed form to the volunteer co-ordinator at:

enewman@nikkeiplace.org Emiko Newman, Volunteer Co-ordinator

Nikkei National Museum & Cultural Centre 6688 Southoaks Crescent Burnaby, BC V5E 4M7

FAX. 604 777 7001 TEL. 604 777 7000 ext. 114



SATURDAY, AUGUST 30, 2014

Morning (9:00am-2:00pm)

Afternoon (2:00pm-6:00pm)

Night (6:00pm-10:00pm)

All Day (Anytime)

SUNDAY, AUGUST 31, 2014

Morning (9:00am-2:00pm)

Afternoon (2:00pm-6:00pm)

Night (6:00pm-10:00pm)

All Day (Anytime)

WHAT AREAS WOULD YOU PREFER TO HELP WITH?

Vendor Booths Beer Garden

Food Booths (19+ and Serving It Right an asset)

Take Down

Games

General (Anywhere)

T-SHIRT SIZE

S L

M XL