

**FEST VOLUNTEER APPLICATION FORM**

Please print clearly

Attach your resume and photo to this application

**General Information:**

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY/STATE/ZIP \_\_\_\_\_ E-MAIL \_\_\_\_\_

HOME PHONE \_\_\_\_\_ WORK \_\_\_\_\_

MESSAGE/VM \_\_\_\_\_ CELL/PGR \_\_\_\_\_

**Availability (Circle all that apply.)**

The more detailed you can be, the more easily we can place you, especially if you are interested in pre-Festival assistance.

 WEEKDAYS  
 M T W Th F

 WEEKNIGHTS  
 M T W Th F

 WEEKENDS  
 Sa Su

**Skills and Interests:**

Please list any skills that match our AFI needs (Circle all that apply):

Mac	PageMaker	FileMaker Pro	HTML	MS Excel
MS Word	AV Experience	Graphics Experience	Writing/Journalism	

Foreign Language \_\_\_\_\_

Please indicate any special training, skills or interests you have and what type of volunteer service you'd like to offer.

\_\_\_\_\_

Is there anything you are unwilling to do as a volunteer for the Festival? (Serious or humorous answers are acceptable.)

\_\_\_\_\_

**Additional Information:**

Are you under 18 years old? YES NO

PLEASE NOTE: Volunteers under the age of 18 MUST have written permission from parent or guardian.

How did you hear about AFI FEST? \_\_\_\_\_

Your shirt size: S M L XL 2X 3X (circle ONE) No guarantee on shirts; info is collected just in case.

Are you willing to run errands in your vehicle for the staff? YES NO

Are you willing to drive a Festival vehicle during the Festival? YES NO

Do you have a valid California driver's license? YES NO (If yes, # \_\_\_\_\_)

Do you have any medical conditions or ongoing medical treatment that we should be aware of? YES NO

If yes, please explain: \_\_\_\_\_

## **Emergency Contact**

Person to notify AND Phone Number and Alternate Phone Number

Address/City/State/Zip

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If a medical emergency should occur, we could provide the name of your insurance/health carrier. Do you wish this?  
YES NO

If yes, please provide all necessary info below:

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## **Release:**

I, the undersigned, understand that AFI is in no way responsible for any injury or theft that may occur during the course of my duties as a volunteer for the AFI Los Angeles International Film Festival. Any and all privileges assigned/offered by AFI may be revoked at any time, regardless of cause. I release AFI of any and all damage to persons/vehicles I use during the course of my volunteer services.

Volunteer Signature

Date

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**I maintain that all of the information listed on this form is correct to the best of my knowledge.**

Volunteer Signature

Date

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## **Duration:**

Today's date: \_\_\_\_\_ to Festival end (no later than 12/5/03)

### **Section Below to be Completed by AFI Personnel. Do Not Write Below this Line**

Volunteer Schedule AFI FEST 2003 VOLUNTEER

Location: ANY AFI FEST LOCATIONS

Signature

Date

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(Program Director)

Signature

Date

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(AFI Representative)

Signature

Date

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(Human Resources Representative)