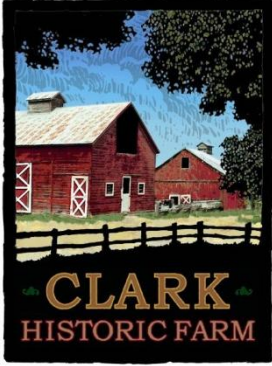


# Clark Historic Farm Youth Guild Application



## Contact Information

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Home phone: \_\_\_\_\_

Cell phone: \_\_\_\_\_

Email: \_\_\_\_\_

Date of birth: \_\_\_\_\_

T-Shirt size: \_\_\_\_\_

Parent contact name/phone/email: \_\_\_\_\_

### 1. Events at which you would like to volunteer:

- |   |  |
|---|--|
| <input type="checkbox"/> Memorial Day 5k  | <input type="checkbox"/> Summer theatre concessions (early August)                 |
| <input type="checkbox"/> Memorial Day Breakfast                                       | <input type="checkbox"/> Honey Harvest Festival, (2 <sup>nd</sup> weekend in Oct.) |
| <input type="checkbox"/> Kids' Farm Camps (M-Th, early June)                          | <input type="checkbox"/> Gala fundraising dinner server                            |
| <input type="checkbox"/> Summer Concert Series (select Saturdays)                     | <input type="checkbox"/> Live Nativity (2 <sup>nd</sup> weekend in Dec.)           |
| <input type="checkbox"/> Farmers' Market (Saturdays in Sept. & first 2 weeks in Oct.) |  |

**2. On the reverse side of this page (or on a separate page), please write a paragraph or two about why you want to be a Clark Farm Youth Guild volunteer, and why you care about Grantsville's history.**

**3. Name of Reference (unrelated): \_\_\_\_\_ Phone: \_\_\_\_\_**

We understand that Clark Historic Farm and Friends of Clark Historic Farm are not liable for any injury, death, lost or stolen property. I, (applicant), have never been convicted of a felony. We understand that my application may or may not be accepted, and that I may or may not get to volunteer at every activity selected above. I volunteer (or allow my minor child to volunteer) of my own free will and understand these terms.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_

**Thank you for volunteering!**