

# VOLUNTEER APPLICATION

## STORM POKER RUNS

### CONTACT INFORMATION:

Name: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City, State, Zip Code: \_\_\_\_\_  
Home Phone: \_\_\_\_\_  
Mobile Phone: \_\_\_\_\_ Do you accept Text Messages: Y / N  
T-Shirt Size: \_\_\_\_\_ Birthday: \_\_\_\_\_  
Fax Number: \_\_\_\_\_  
Email Address: \_\_\_\_\_  
Best method for communication: \_\_\_\_\_

### AVAILABILITY:

During which hours are you available **before** the event:

\_\_\_\_\_ Weekdays Mornings \_\_\_\_\_ Weekdays Days \_\_\_\_\_ Weekdays Evenings \_\_\_\_\_ Anytime  
\_\_\_\_\_ Weekend Mornings \_\_\_\_\_ Weekend Days \_\_\_\_\_ Weekend Evenings

During which hours are you available **at** the event:

\_\_\_\_\_ Weekdays Mornings \_\_\_\_\_ Weekdays Days \_\_\_\_\_ Weekdays Evenings \_\_\_\_\_ Anytime  
\_\_\_\_\_ Weekend Mornings \_\_\_\_\_ Weekend Days \_\_\_\_\_ Weekend Evenings

### INTERESTS:

P O K E R R U N S

Tell us which areas you are interested in volunteering:

- Set Up – Typically AM Hours
- Take Down – Typically PM Hours
- Apparel
- Registration / Check- In
- Card Turn In
- Krusin' for Kids (Boat)
- Krusin' for Kids (Dock)
- Shootout Crew
- Street Party Crew
- Event Prep

### SPECIAL SKILLS OR QUALIFICATIONS:

Summarize special skills and qualifications you have acquired from employment, previous volunteer work, or through other activities.

**PREVIOUS VOLUNTEER EXPERIENCE:**

Summarize any previous volunteer experience.

**PERSON TO NOTIFY IN CASE OF AN EMERGENCY:**

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Relationship: \_\_\_\_\_ Email Address: \_\_\_\_\_

**OUR POLICY:**

It is the policy of Phantom Productions, LLC. The event producers of Storm Poker Runs, to provide equal opportunity without regard to race, religion, national origin, gender, sexual preference, age or disability. This is a volunteer position in which you are applying for. You will not be compensated for the work assigned however based on the duties assigned or chosen you may be offered room and board for the event.

**AGREEMENT AND SIGNATURE:**

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as a volunteer, any false statements, omissions or other misrepresentations made by me on this application may result in immediate dismissal.

Name (Printed): \_\_\_\_\_  
**P O K E R R U N S**

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

Thank you for completing this application and your interest in volunteering with Storm Poker Runs. Once completed please email, fax or mail to the contact info below.

**Christina Crane**

**Event Manager for DESERT STORM & MONSTER STORM Poker Runs  
Phantom Productions, LLC.**

**P.O. Box 445 Peoria, AZ 85345**

**623-238-1330 Mobile / 623-322-9027 Fax**

**Email: [Christina@stormpokerruns.com](mailto:Christina@stormpokerruns.com)**

**Website: [www.stormpokerruns.com](http://www.stormpokerruns.com)**

**Facebook: [www.facebook.com/stormpokerruns](http://www.facebook.com/stormpokerruns)**

**Instagram: [www.instagram.com/stormpokerruns](http://www.instagram.com/stormpokerruns)**