**Volunteer Fact Sheet**

**2016-17 Season**

**Please Print Clearly**

 **Check One: Previous Volunteer First Year Volunteer Transfer**

**Volunteer Information**

Legal Last Name Legal First Name Legal Middle Name

FIRST NAME YOU GO BY ANY OTHER ALIAS - “ALSO KNOWN AS . . .”

Mailing Address City State Zip

Physical Address (if different) Address City State Zip

Primary Phone Number (include area code) Other Phone Number (include area code)

Email Address Fluent Foreign Language(s)

**Emergency Contact(s) Information**

Full Name Relationship Phone (include area code)

Full Name Relationship Phone (include area code)

**Check One: Bank Ticket Benefit Family Pass Benefit** (If family pass, complete the below)

**Dependent Information**

You must complete a Season Pass - Winter Activity Participant Release for each family member eligible for privileges.

Spouse: Birth Date: Age:

First Name Last Name

Child:

Grandchild: Birth Date: Age:

First Name Last Name

Child:

Grandchild: Birth Date: Age:

First Name Last Name

Child:

Grandchild: Birth Date: Age:

First Name Last Name

Child:

Grandchild: Birth Date: Age:

First Name Last Name

I hereby certify that I have not knowingly withheld any information and that the answers given by me are true and correct to the best of my knowledge. I understand that any omission or misstatement of material facts on any document shall be grounds for rejection or for immediate discharge, regardless of the time elapsed before discovery.

Signature:

Date :