

# VOLUNTEER REGISTRATION FORM:

Email to [info@ccacpineville.org](mailto:info@ccacpineville.org) or mail to CCAC, P. O. Box 606, Pineville, NC 28134



The Civic & Cultural Arts Center of Pineville is looking for volunteers

**Want to be a VIP Volunteer? Just sign up for 2 events!**

VIP Volunteers will receive VIP credentials to a special event

**Every volunteer will receive:**

- \* Invitation to Volunteer Appreciation event
- \* CCAC Volunteer T-shirt
- \* water and/or soft drinks at each event

Please check what interests you might have:

- Event- Site Management –  
Assist with setting up chairs, tables, signs, fencing, banners and posters at venue, overall layout – or helping disassemble and clean up.
- Event- Volunteer check in
- Assist kids and their parents participating in activities
- Event- assist station booths, replenishing stocks, etc.
- Risk Management/Public Safety Assist with on-site event safety
- Other (please specify)v: \_\_\_\_\_

May we contact you to explain other activities you may be interested in?:  yes  no thank you

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**Please provide the following information for each associate/ friend /family member volunteering. (Please - must be at least 16 years old).**

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**First Name:** \_\_\_\_\_

**Last Name:** \_\_\_\_\_

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

**City:** \_\_\_\_\_

**State:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_

**Home Number:** \_\_\_\_\_

**Cell Number:** \_\_\_\_\_

**Work Phone:** \_\_\_\_\_ **Can we call you at work?**  Yes  No

**Email address:** \_\_\_\_\_

**Emergency Contact Name:** \_\_\_\_\_

**Emergency Contact phone** \_\_\_\_\_

**T-Shirt Size:**  (S)  (M)  (L)  (XL)  (XXL)

Participation during Civic & Cultural Arts Center of Pineville related activities is voluntary on the part of each participant. The undersigned hereby releases CCAC, The Town of Pineville, their agents, employees and successors or assigns, for any claims, causes of action or liability arising from or in connection with this volunteer opportunity.

I have read the foregoing release, authorization and agreement, and warrant that I fully understand the contents thereof by submitting this application.

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

**Signature of Parent or Guardian if volunteer under the age of 18:** \_\_\_\_\_