



**Downtown YMCA 2009 Jingle Bell Run
Volunteer Application**
Return completed application by
December 1, 2009
Phone: (713)659-8501 v
Fax (713) 659-4314
www.jinglebellrun.org

PLEASE PRINT

Name _____ (OFFICE USE ONLY) VolID# _____

Address _____

City _____ State _____ Zip Code _____ (required)

Please list numbers. Place a **b** next to the number where you can be reached between the hours of 10:00 and 4:00pm

Home Phone #: (____) _____ - _____ Work Phone #:(____) _____ - _____

Cell Phone#: (____) _____ - _____ Other Phone#:(____) _____ - _____

E-mail Address: _____ Two-Way Pager: _____

Employer _____ Occupation _____

If you represent an Organization, Group or School, kindly list: _____

Have you volunteered with the Downtown YMCA Jingle Bell Run in the past? Yes No

If yes, list the year(s) and department(s): Year/Dept _____, Year/Dept _____,
Year/Dept _____, Year/Dept _____, Year/Dept _____, Year/Dept _____

List any special skills you feel you have to bring to JBR Volunteer Dept:

What do you hope to take away from this volunteer experience? : _____

In case of an emergency, notify (Your JBR Volunteer application will not be accepted without this information)

Name _____ Relationship _____

Phone#: (____) _____ - _____ Phone #: (____) _____ - _____

If you need a reasonable accommodation, what would that be? _____