



VOLUNTEER REGISTRATION

2018 HEArt Show
September 28, 2018
 Benefitting
 Professionals United for Parkland

Today's Date ____/____/____

CONTACT INFORMATION

First Name	Last Name	Birth Date	
Mailing Address	City	State	ZIP Code
Cell Phone No.		Work Phone No.	
Email Address	Fax No.		Work Phone No.
School/Company/Organization (if applicable)		How did you hear about this event?	

How would you like to help?

Check all that apply:

- Event Set up** – assist with decorations, display construction and art placement.
- Host/Hostess** – check in guests, hand out programs, direct guests during event.
- Gallery Assistant** – assist guests in locating and purchasing art.
- Muscle** – loading, lifting and moving.
- Administration** – help with mailings, phone calls, and other projects.
- Wrap Up** – take down decorations, displays and load art.
- Other:** _____

All volunteers are required to participate in a one-hour pre-event meeting to be held the weekend before the event. Date and time to be determined.

 Signature of Volunteer

 Date

 Signature of Parent

(for Volunteers under the age of 17)

 Date

Email completed registration to Info@HEArtShow.org

*Healing Through Expressive Arts, Inc
 HeartShow.org
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 (P) 561.819.2555
 Info@HEArtShow.org*