

Volunteer Application



AIDS Memorial Quilts

December 1-3, 2008

OnCenter

Syracuse, NY

Name: _____

Organization: _____

Email: _____

Phone #: _____

Address: _____

Date that I am able to volunteer: _____

Time that I am able to Volunteer: _____

Task I am interested in doing: (check all the apply)

- | | | |
|--|--|---|
| <input type="checkbox"/> Greeting people | <input type="checkbox"/> Directing guests where to go | <input type="checkbox"/> Handing out literature |
| <input type="checkbox"/> Information table | <input type="checkbox"/> Classroom (providing education) | <input type="checkbox"/> Monitoring quilt |
| <input type="checkbox"/> Set-up | <input type="checkbox"/> I will do whatever is needed | <input type="checkbox"/> Clean-up |

I can attend the orientation/training on November 14th, from 1:00-3:00 pm at Syracuse University in Life Sciences Building, room 001. Yes No

Please return this form to Sean Maloney, swmalone@syr.edu, (315) 443-1529, 750 Ostrom Ave, Syracuse, NY 13210.