

VOLUNTEER SIGN-UP

Thank you for helping ATHS in making this year's event one of the best! Things to keep in mind when signing up: preferred day(s); preferred time(s); possible health/physical restrictions; scheduling conflicts with other activities.

Volunteer information will be distributed once finalized. If you have any questions, comments or need to make a change to your volunteer application, please contact ATHS at (816) 891-9900, or by email at volunteer@aths.org.

PLEASE PRINT CLEARLY and complete all fields. Name and contact information may be shared with other show staff, as needed to assist with onsite communication.

Full Name _____ ATHS Chapter _____

Home # _____ Mobile# _____ Email _____

AVAILABILITY

Check all days available for each time shift.

7:15 a.m. - 10:15 a.m.

MON. TUES WED THURS FRI SAT

10 a.m. - 1 p.m.

MON. TUES WED THURS FRI SAT

12:30 p.m. - 3:30 p.m.

MON. TUES WED THURS FRI SAT

3 p.m. - 6 p.m.

MON. TUES WED THURS FRI SAT

INTERESTS VOLUNTEER AREAS

Check all that apply.

- Truck Parking
- Traffic Control/Gate Monitor
- Transport Parking
- Unloading
- Spectator/Gate Sales
- Truck Registration
- Hospitality
- Photo
- ATHS Terminal

VOLUNTEER SKILLS

Check all that apply:

- Cannot stand for long periods of time.
- Unable to lift over 15-20 pounds.
- Not comfortable using computers.
- Are there any known health conditions/allergies that medical emergency professionals should be made aware of?

Emergency Contact Information:

Full Name: _____

Relationship: _____

Cell Phone: _____

This person will be onsite at the show.

