



YukomiCon | Yukon Comic Culture Society (YCCS)
3121 3rd Avenue, Whitehorse, YT Y1A 1E6
info@yukomicon.com | www.yukomicon.com

VOLUNTEER FORM
YukomiCon 2017
August 25-27

Instructions:

- Please print legibly
- Answer questions completely
- All information provided will be kept confidential

Submission Information:

Applicant Name: _____

Email: _____ Phone: _____

Age Group:

- 13-18 years 19-25 years 26 years and up

T-Shirt Size: _____

Interested In (Please check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> Security (Police Check Required) | <input type="checkbox"/> Gaming |
| <input type="checkbox"/> Registration/Ticket Sales | <input type="checkbox"/> Special YukomiCon Programming |
| <input type="checkbox"/> Kids Corner (Police Check Required) | <input type="checkbox"/> Set Up/Clean Up Crew |
| <input type="checkbox"/> Ambassador/Hospitality
(information booth, errand running, gopher, panels, etc.) | <input type="checkbox"/> Non-Con Events for YCCS |

Do you have any certificates or licences? (First Aid, Driver's Licence, Food Safe, BARS, etc.)

Availability:

Please include what days and hours you would be available:

August 24, 2017 (Set Up Crew Only)

- Morning Afternoon Evening Night
- Other (please be specific) _____

August 25, 2017

- Morning Afternoon Evening Night
- Other (please be specific) _____

August 26, 2017

- Morning Afternoon Evening Night
- Other (please be specific) _____

August 27, 2017

- Morning Afternoon Evening Night
- Other (please be specific) _____

I would be interested in being an On-Call Volunteer

Signatures:

I certify that the information given in this application is to the best of my knowledge and ability, complete, true and correct.

Volunteer: _____ Date _____

Parent/Guardian Name: _____
(if under 18)

Parent/Guardian Signature: _____ Date _____
(if under 18)

