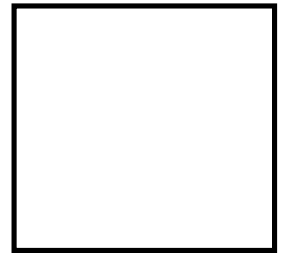




# PAN AFRICAN FILM and ARTS FESTIVAL VOLUNTEER APPLICATION 2008



## PERSONAL INFORMATION (PLEASE PRINT)

Name \_\_\_\_\_ E-Mail \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip Code \_\_\_\_\_

Day Phone # \_\_\_\_\_ Evening Phone # \_\_\_\_\_ Cell # \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Phone # \_\_\_\_\_

## AREA(S) OF INTEREST:

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> Administrative Support | <input type="checkbox"/> Hospitality                | <input type="checkbox"/> Student Fest                        |
| <input type="checkbox"/> Art Festival           | <input type="checkbox"/> Labor/ set-up & break-down | <input type="checkbox"/> Sponsorship/ Donations              |
| <input type="checkbox"/> Catering               | <input type="checkbox"/> Merchandise Sales          | <input type="checkbox"/> Team Leaders                        |
| <input type="checkbox"/> Children's Fest        | <input type="checkbox"/> Office Support             | <input type="checkbox"/> Technical Operations                |
| <input type="checkbox"/> General Operations     | <input type="checkbox"/> Registration               | <input type="checkbox"/> Theatre / Ticket Taking (9am - 1am) |
| <input type="checkbox"/> Filmmaker Relations    | <input type="checkbox"/> Special Events             | <input type="checkbox"/> Transportation (Valid Driv. Lic.)   |
| <input type="checkbox"/> Film Traffic           | <input type="checkbox"/> Spoken Word Fest           | <input type="checkbox"/> Workshops/Seminars/ Panels          |

## DESCRIBE ANY PREVIOUS VOLUNTEER, EVENT, OR FESTIVAL EXPERIENCE

\_\_\_\_\_  
\_\_\_\_\_

## FEBRUARY 2008 AVAILABILITY (Please indicate the hours available)

DAY & DATE	MORNING	AFTERNOON	EVENING	EVENT
Thur. 7 <sup>th</sup>				Opening Night
Fri. 8 <sup>th</sup>				Student Fest, Spoken WordFest
Sat. 9 <sup>th</sup>				Children's Fest, Night of Tribute
Sun. 10 <sup>th</sup>				
Mon. 11 <sup>th</sup>				StudentFest
Tues. 12 <sup>th</sup>				StudentFest
Wed. 13 <sup>th</sup>				StudentFest, Centerpiece
Thur. 14 <sup>th</sup>				StudentFest
Fri. 15 <sup>th</sup>				StudentFest, SpokenWordFest
Sat. 16 <sup>th</sup>				Children's Fest
Sun. 17 <sup>th</sup>				Closing Night
Mon. 18 <sup>th</sup>				Filmmaker's Award Breakfast

Are you at least 18 years of age ? Yes  No  If not, parent / guardian permission & signature required

As a volunteer of the Pan African Film and Arts Festival, I understand that I am not an employee and that I will not receive any compensation for the donation of my time and work performed for the event. I hereby acknowledge that my services shall be rendered solely on a volunteer basis. Furthermore, I understand that the Pan African Film and Arts Festival does not cover me by any insurance such as worker's compensation, etc. in the event of illness or injury. I hereby certify that the information contained in this application is true and correct to the best of my knowledge.

Signature \_\_\_\_\_

Date \_\_\_\_\_

DO NOT WRITE IN THIS SPACE - FOR PAFF USE ONLY

ASSIGNMENT

REMARKS