

2011 Bothwell Cup

VOLUNTEER INFORMATION FOR INDIVIDUAL VOLUNTEERS

Name: _____

Club/Team Affiliated With (If applicable) : _____

Home Phone: _____

Work or Cell Phone: _____

Email Address: _____

Day/Time(s) Available: _____

I would like to volunteer with **Registration/Check In** ___ **Field Marshall** ___ **Concessions**

VOLUNTEER INFORMATION FOR GROUPS/ORGANIZATIONS

Contact Name: _____

Group Affiliated With : _____

Contact Phone: _____

Work or Cell Phone: _____

Email Address: _____

OYSAN is a non-profit organization. Volunteers are non-paid, however many organizations may be able to use volunteering at the tournament as a community service project.

My organization would need a letter/document stating our service to OYSAN ___ Yes ___ No

Number of volunteers I can provide: _____

Day/Time(s) Available: _____

I would like to volunteer with **Registration/Check In** ___ **Field Marshall** ___ **Concessions**

Please complete this form and Fax to 330-659-0993 or email to tgrabowski@ohionorthsoccer.org **No Later than OCTOBER 1, 2011**

