



**PINBALL EXPO 2018
VOLUNTEER APPLICATION**

APPLICANT INFORMATION

Please complete your name and contact information in the fields below.

Name (Full Name Required) _____

Email Address _____

Cell Number/Contact Number _____

AVAILABILITY

AVAILABILITY (Please fill in day or days and times you can volunteer with us):

WEDNESDAY, OCT 17th	THURSDAY, OCT 18th	FRIDAY, OCT 19th	SATURDAY, OCT 20th
LIST TIMES BELOW:	LIST TIMES BELOW:	LIST TIMES BELOW:	LIST TIMES BELOW:

Please visit the website page for more information: www.pinballexpo.com/volunteer.html

NOTICE TO VOLUNTEER APPLICANTS: Please email your application to: info@pinballexpo.com or mail your application to: PINBALL EXPO VOLUNTEER, 1085 Eagle Trace Street, Warren, Ohio 44484

AGREEMENT

By submitting this application, I hereby agree to all terms within Pinball Expo Volunteer Program.

PRINT NAME _____ SIGNATURE _____