



Volunteer Registration Form

If you would like to become a volunteer at the LINDSAY CONCERT FOUNDATIOIN, please fill out the form below. We will get back to you as soon as possible.

* : required fields

Title Mr. Mrs. Miss Ms. Dr.
 M. Mme Mlle

First Name *

Last Name *

Address *

City *

Province *

Postal Code *

Home Phone # *

Work Phone #

Mobile Phone #

Fax Number

E-Mail Address *

Contact Preferences Home Work Mobile Email

Emergency Contact Name
 Primary Phone
 Secondary Phone
 Relationship

Special Medical Needs

Allow my name to be published in the Programme Yes No

Add to LCF Mailing List? Yes No

Preferred Language

English French

Age Category

Under 30 30 to 64 Over 64

Current Status

Student Employed Retired
 in Transition

Are you currently attending high school?

Yes No

If so, where?

How did you hear about us?

Friend Attended Festival School
 Newspaper Volunteer Ottawa
 Other

Language Proficiency:

English

Spoken Written

Français

Parlé Écrit

Personal information on this form is considered confidential under LCF's Privacy Policy.

Please check the areas for which you would be most suited to volunteer:

Fundraising

General Fundraising

Sponsorship Solicitation

Advertising Sales

Ticket Sales Committee

Grant Writing

Concert Activities

House Manager

Stage Manager

Assistant Stage Manager

Ticket Sales

Merchandise & Programme Sales

Usher

Page Turner

Office Activities

Stuffing envelopes/mail outs

Record Management

Ticket Sales/Office

Reception Desk/Telephones

Music Research

Proofreading-English

Proofreading-French

Language Translation (please specify):

Promotional Activities

Flyer/Brochure Distribution

Putting up posters

Outreach Youth/Choral Activities

Promotion

Event Support

Administration

Transportation

Equipment, Donations and/or Artists

Vehicle available for transportation

Car

Van

Previous Arts Event Experience

Yes No

Related skills and/or experience _____

Why are you interested in volunteering? _____

Volunteer Availability:

Time of Year

- Summer Fall Winter
 Spring Year Round

Time of Day

- Weekdays Evenings Weekends
 Flexible

Please complete the form and return it to:

LINDSAY CONCERT FOUNDATION

Mailing Address: P.O.Box 631, Lindsay, ON, K9V 4S5

Office Address: Suite 207, Gateway Plaza, 55 Mary Street West, Lindsay,

Phone: 705-878-5625 Fax: 705-878-5574

Email: lindsay_concertfoundation@bellnet.ca

Website: www.lindsayconcertfoundation.com