

South Florida Fair & Palm Beach County Expositions, Inc.

P. O. Box 210367 ♦ West Palm Beach ♦ Florida 33421-0367 ♦ (561)793-0333

Volunteer Application – Please Print

Full Name: _____

Recommended by: _____

Skills: _____

Occupation: _____

Home Address: _____ City/ST/Zip: _____

Home Email: _____ Home Phone: _____

Date of Birth: _____ Cell Phone: _____

Volunteer Opportunities: (please check all those that you would be interested in.)

Yesteryear Village Guest Services Agriculture/Livestock Other _____

Would you like to volunteer during school tours in Yesteryear Village? Yes ___ No ___

Are you fluent in any language other than English? If so, please indicate the language. _____

Have you ever been convicted of a crime? Yes ___ No ___ If yes, please describe in full: _____

In case of emergency, person to contact:

Name: _____ Relationship: _____ Phone: _____

The information above is true and complete. I understand this is not a contract of employment and that as a volunteer, I am not an employee of the South Florida Fair and Palm Beach County Expositions, Inc. and I will not receive compensation for my services. I understand and agree that a criminal history and background check will be conducted on all volunteer applicants. Any volunteer working with cash will be required to have a credit check completed. I also understand that, if selected, I may need to participate in a volunteer orientation before beginning to serve and should any accident or injury occur to me or others while volunteering; I will immediately notify an employee of the South Florida Fair.

I realize that any conduct detrimental to the best interests of the South Florida Fair and/or its patrons may result in my immediate removal from the South Florida Fair program.

I understand that my photograph may be taken and utilized and that my contact information may be shared with the South Florida Fair, its employees or agents.

Volunteer Signature _____ Date: _____

Volunteers under the age of 18 must have a parent or legal guardian give permission by filling out and signing the below information:

PLEASE PRINT

I, _____ give my child, _____ permission to volunteer with
PARENT/GUARDIAN NAME
the South Florida Fair and Palm Beach County Expositions, Inc.

Child's Grade: _____ **Birthdate:** _____

Parent/Guardian Signature: _____ Date: _____

Home Phone: _____ Work Phone: _____ Cell Phone: _____