

Vegreville Drag Racing Association

PO Box 316, Vegreville, AB T9C 1R3

2010 Volunteer Application Form

Name: _____

Address: _____

Home Phone # () _____

Work Phone # () _____

Cell Phone # () _____

Age: _____ Gender: M F

If applicant is under the age of 18, a waiver application must be completed by a legal parent/guardian in the presence of a VDRA member.

Email: _____

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Positions Available: *(please use numbers to indicate order of preference)*

- | | | | |
|------------|-----------------------|-----------|-----------------------|
| Gate | <input type="radio"/> | Tech | <input type="radio"/> |
| Tower | <input type="radio"/> | Water Box | <input type="radio"/> |
| Staging | <input type="radio"/> | Security | <input type="radio"/> |
| Concession | <input type="radio"/> | | |

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Please tell us a bit about yourself, (i.e. profession, hobbies, any experience with cars in general, or if you have worked in a drag race facility before) _____

