Volunteer Application

MAC TOUR USA VOLUNTEER REGISTRATION FORM

Address: 10115 Sunset Strip, Sunrise FL 33322
Fax: 1-954-746-4388 **Phone:** 1-954-746-4387
(Please Print Black or Blue Ink Only)

What Position are you volunteering for? [ ] Scorekeeper [ ] Referee [ ] Sr. Scorekeeper [ ] Sr. Referee

First Name MI Last Name

E-mail Address (Need email address to send confirmation)

Gender M F [ ] Age Under 18 [ ] Over 18 Scorekeeping Experience in Months _____ Shirt Size _____

Home Address_____Apt: _____

City _____ST _____ Zip _____

Phone Number_____ Emergency Phone Number _____

Do you have experience in the position your requesting ? [ ] yes [ ] no

IF yes, How long have you volunteered in this position ? _____

What Organization did you volunteer for ? _____

Are you a Martial Artist [ ] yes [ ] no Are you a parent or spouse of an athlete [ ] yes [ ] no

Have you completed the MAC TOUR USA certification course for this position? [ ] yes [ ] no When? _____

Do you have a preference where you assist? [ ] yes [ ] no If Yes, What Age Group _____

Organization/Martial Arts School Information:

School/Team Name _____

Owner/Manger Name_____

City _____St _____ Zip _____

Phone Number_____ Fax _____