

Legends Registration Form

Student Info

First & Last Name _____

Grade _____

Main Program _____ Secondary: _____ Additional: _____

Volunteer 1 Info

First & Last Name _____

Cell Phone _____

Email (please print clearly) _____

Volunteer 2 Info

First & Last Name _____

Cell Phone _____

Email (please print clearly) _____

Misc. Info

- Returning
- New

Do you have any previous experience with the following?

- Bartending
- Registers
- Stocking

When are you available to work?

- Wednesdays
- Thursdays
- Friday & Saturdays
- Sundays

