

STUDENT VOLUNTEER APPLICATION FORM

Name of Student: _____

Address: _____
(include the postal code)

Telephone no.: _____ **E-mail:** _____

Name of Music Teacher: _____

Teacher's Telephone No. : _____

Emergency Contact:

Name: _____ **Phone no.:** _____

Relationship: _____

Volunteer Positions: (Please put \checkmark mark in the appropriate box.)

- Trophies helper
- Honour Recital helper

Declaration of Student:

I hereby agree to comply with the regulations and policies of the Student Performers' Guild Festival. In signing this form, I hereby acknowledge that I have read and understood the conditions as set on page 12.

Student's Signature/ Parent's Signature (if student is under 16)

Print Name: _____

Date: _____

Please return this form to any Student Performers' Guild Committee member or the chair by **October 4, 2009**

not being used at the present time

Student Volunteer Program – Record Sheet

Name of Student: _____

Address of Student: _____
(include the postal code)

Telephone No.: _____ E-mail: _____

Date of Service	Volunteer Position	Signature of SPG Committee
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Total no. of hours of service: _____ Hours

Signature of Student/Parent if student is under 16:

Signature of Music Teacher: _____

Signature of SPG Chair: _____

Please return this form to the chair of Student Performers' Guild by December 6, 2009, before the start of the 1st Honour Concert.

Certificate of Participation will be awarded at the end of the last Honour Recital. Certificates not collected will be sent to their respective music teachers.