



August 31st to Sept.4th, 2011

2011 VAN OPEN VOLUNTEER APPLICATION FORM

Last Name: _____ First Name: _____

Address: _____

City: _____ Prov. _____ Postal Code _____

Telephone: _____ Email: _____

Sex: M F Shirt Size: _____

Volunteer Position Requested: (Please Rank in Priority your selections)

Admissions _____ Course Set-up _____ Hospitality _____ Registration _____

Marshal _____ Parking _____ Range _____ Silent Auction _____

Scoring _____ Transportation _____ Medical _____

Relative Experience: _____

Days Available: We ask volunteers to commit to a minimum of two 6 hour shifts during tournament week. If you are able to do more, please check more shifts. You will be notified of your assignment by your Committee Chairperson closer to the event and receive uniforms/instructions at the orientation meeting at Fraserview Golf Course on date TBA in middle of August.

Wed (9am-3pm) Wed (2-8pm) Thurs (12-6pm) Fri (6am-12pm)

Fri (10am-4pm) Fri (12-6pm) Sat (6am-12pm) Sat (12pm-6pm)

Sat (2pm-8pm) Sun (6am-12pm) Sun (12pm-6pm) Sun (3pm-9pm)

In case of emergency, please notify: _____ Tel: _____

Please note any physical disabilities including allergies that may restrict your involvement:

VOLUNTEER FEES – TWO OPTIONS:

FREE: If you bring your own navy golf shirt and look after your own meals. You will receive two weekly tickets to watch the Vancouver Open (\$40 value)

PAYMENT: \$25.00 + HST = \$28.00 – Includes the following:

- ◆ A commemorative PIN HIGH Vancouver Open golf shirt (\$60 value)
- ◆ Two weekly tickets to watch the Vancouver Open (\$40 value)
- ◆ A meal voucher for each six hour volunteer shift (\$10 value)
- ◆ Vancouver Open Hat (\$30 value)

Please Indicate Method of Payment:

CHEQUE (payable to Vancouver Golf Tour)
Please mail to our address below or bring to volunteer orientation meeting.

PAYPAL OR CREDIT CARD (Online at www.vancouveropen.ca)

I agree that I am accepted into membership in the 2011 Vancouver Open Volunteers Association, I shall diligently perform my assigned duties and co-operate with my fellow volunteers and with VGT Officials. I acknowledge that I may be required to leave the grounds of the event if I fail to conduct myself as above stated.

Signature: _____ Date of Application: _____

Signature of Parent/Guardian: _____ (if volunteer is under 19 yrs.)

Send Cheque to:

Vancouver Golf Tour
C/O Volunteers
P.O. Box 18
#112-1151 Mt. Seymour Road
North Vancouver, BC V7H 2Y4

For More Information, contact Heidi Tran
Vancouver Golf Tour:
Phone: (778) 386-4042
Email: info@vancouvergolftour.com

I wish to be added to Vancouver Parks Golf monthly email list to receive golf news and great specials.