



**2009 GREEN BAY POLAR PLUNGE**  
**Saturday, February 28**  
**The Watering Hole, Velp Avenue**  
**VOLUNTEER INFORMATION FORM**

Volunteers are needed to help make this event a success. Please check those opportunities you are interested in. All efforts will be made to accommodate your interests.

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- EVENT SET-UP - Friday, Feb. 27** Helping to load supplies, barricade set-up, tables, sign posting, registration organization, etc.  
Approximately 9am - 7pm *flexible*
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- EVENT SET-UP - Saturday, Feb. 28** Barricade set-up, tables, sign posting, registration organization, etc. Approximately 7am-9am
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- REGISTRATION- Saturday, Feb. 28** You'll be helping to register Plungers by giving out incentives, participant wristbands, assigning plunge times, entering plungers into the database and handing out event programs.  
Approximately 9am-12pm
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- FOOD/INDOOR HOSPITALITY - Saturday, Feb. 28** Helping to serve food, keep the venue clean, clear tables, change out trash bags, etc.  
Approximately 9am-4pm
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- POLAR PLUNGE SECURITY - Saturday, Feb. 28** Outside, you will check wristbands and help keep the plunge line moving. Inside, you will work the "plunger only" areas. Approximately 9am-3:30pm *flexible*
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- SOUVENIR OR RAFFLES SALES - Saturday, Feb. 28** Two areas where Plungers and spectators can purchase or win goodies to remember the big day!  
Approximately 9am - 3:30pm
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- CLEAN UP - Saturday, Feb. 28** Nothing too glamorous here, but we promise to provide a good time! Most volunteers stay and pitch in to get the job done quickly! Approximately 3:30pm-6pm

**SPECIAL OLYMPICS WICON SIN  
CLASS B INDIVIDUAL VOLUNTEER REGISTRATION FORM  
2009 GREEN BAY POLAR PLUNGE**

Please **PRINT CLEARLY** and **RETURN** this form by Wednesday, February 18 to:

**Special Olympics Wisconsin  
2140 Holmgren Way  
Green Bay, WI 54304  
or Fax to: (920) 497-0126  
kwalker@specialolympicswisconsin.org**

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Age: \_\_\_\_\_ Over 21    \_\_\_\_\_ 18-21    \_\_\_\_\_ 14-17

**\*\*ADULTS AND STUDENTS MUST BRING PHOTO I.D. OR STUDENT I.D. TO THE EVENT\*\***

Please read carefully before signing:

**I grant Special Olympics Wisconsin permission to use my likeness, voice and words  
in television, radio, film or in any form to promote and publicize the purposes of  
Special Olympics.**

\_\_\_\_\_  
Signature of Parent/Guardian (required for volunteers under age 18)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name of Parent/Guardian (required for volunteers under 18)

\_\_\_\_\_  
Parent/Guardian Phone

\_\_\_\_\_  
Signature of Volunteer

\_\_\_\_\_  
Date

Have you volunteered for Special Olympics previously? \_\_\_\_\_

What School / Club / Group are you affiliated with? \_\_\_\_\_