

25th Annual San Dimas Charity Pro Rodeo



Thank you for your interest in volunteering at the San Dimas Charity Pro Rodeo. There are a number of volunteer opportunities and your support is key to the success of this year's rodeo. We truly appreciate your help. We cannot do it without you! Please return this signed form along with the Waiver & Release Form.

GENERAL INFORMATION / RULES & REQUIREMENTS

- Minors must be at least 15 years old, enrolled in High School and show a valid photo I.D. when checking in at the Rodeo.
- Volunteer shirt, name tag/wrist band must be worn at all times while "on duty".
- Closed toe shoes are required, suntan lotion, chap stick and hats are recommended.
- Drinking alcoholic beverages while "on duty" is strictly prohibited.
- Rodeo volunteers represent the San Dimas Charity Pro Rodeo, please act professionally.
- While volunteering, you will receive a coupon for lunch (typically one hot dog or hamburger and one soft drink) and bottled water throughout the day.
- Tip jar contributions are considered donations to the Rodeo.
- We cannot be responsible for lost or stolen items. Please leave your personal items at home or locked in your car out of sight.
- Park or be dropped off in the area marked "Volunteer Parking". Do not enter at the main entrance (ticket booth).
- If volunteers work one day of the rodeo, they are offered one general admission ticket for the second day.

Please select two from the areas listed		der of preference. NOTE: Unless othe turday and Sunday performances.	rwise notified, daily shifts begin
			a (Colf corto)
Any Location Beer / Margarita Booth (Must be 21	Gate Reepel	Parkin Ticket	g (Goil Carls)
Entrance Gate Greeter	Merchandise	Ticket	ent (Serve / Clean / As Needed)
		on Desired)	
Please select which o	dav(s) vou would like to volunt	eer: (Performance days qualify for fre	e rodeo ticket)
Saturo	lay, October 12th	, 12p-3pThursday Sunday, October 13th	Con 10 , 1.00p op
ALL VOLUNTEERS	MUST ATTEND ONE MANDATO	DRY ORIENTATION MEETING. (Pleas Room ~ 1350 W. Covina Blvd., San D	e select one):
Sept. 25 (Wednesday) 6:30pm	Sept. 25 (Wednesday) 7pm	Sept. 29 (Sunday) 9:30am	Sept. 29 (Sunday) 10am
	VOLUNTEER I ALL FIELDS MUST		
Name:		DOB:	Shirt Size:
Address:		City, State, Zip:	
Phone:(Circle one) Home / Cell ()	Emai	:	
Emergency Contact (EC) Name:		Relationship	_ EC Phone ()
☐ Letter/Form is needed for verification☐ I would like to be contacted to volunt			
I acknowledge I have read the General and requirements, I understand I may f			Should I fail to follow these rules
Volunteer Signature		Parent/Guardian Signature (if minor	. Date