



EAST LOS ANGELES  
*Christmas*  
*Parade*  
PRESENTED BY COCA-COLA

PRESENTED BY



VOLUNTEER APPLICATION





## 2016 PARADE VOLUNTEER APPLICATION

Please complete the application below.

You can return it by mail, fax or email and we will respond shortly.

---

Name

---

Address

---

City

State

ZIP

---

Phone

Cell

---

Email Address

**ARE YOU APART OF A GROUP?** (check one)

Yes  No

---

Name of Group

Please list any special skills, work experience, or other volunteer positions you've held in the past.



**Are you willing to attend a volunteer training prior to the day of the parade?** (check one)

Yes  No  Maybe (Depends on my schedule)

**Do you wish to be paired with another volunteer during your shift (family member, friend, spouse)?** (check one)

Yes  No

---

Name

---

Email Address

---

Phone

Note: Each volunteer will need to complete this volunteer registration application.

**Refer a friend, co-worker, family member you think would make a great East Los Angeles Christmas Parade volunteer. Everyone who refers a volunteer who works on the day of the parade will be entered into a special drawing for a chance to win a great prize. List their:**

---

Name

---

Email Address

---

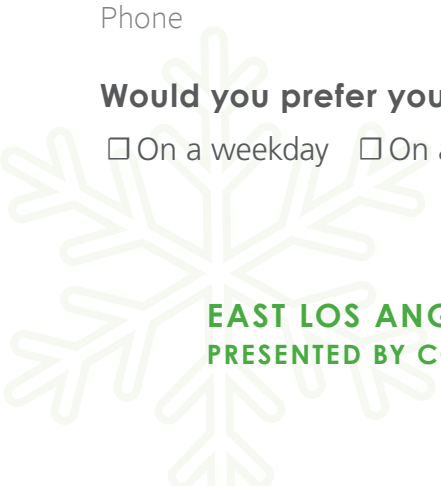
Phone

**Would you prefer your training to be** (check all that apply)

On a weekday  On a weekend  In the evening  In the daytime

**EAST LOS ANGELES CHRISTMAS PARADE**  
**PRESENTED BY COCA-COLA**

**PHONE 424.258.5162 / FAX 424.258.7064**  
**WWW.ELACHRISTMASPARADE.COM**





## 2016 PARADE PARTICIPANT WAIVER

In consideration of being permitted to take part in the 2016 East Los Angeles Christmas Parade, the participant hereby releases, absolves, indemnifies, holds harmless and waives all claims against North Star Alliances, and the East Los Angeles Merchants Association, their agents, employees and sponsors for any losses or injuries of any kind whatsoever arising out of the 2016 East Los Angeles Christmas Parade.

\_\_\_\_\_

Group Name (Please print clearly)

\_\_\_\_\_

Print Name: Primary Contact

\_\_\_\_\_

Date

\_\_\_\_\_

Signature: Primary Contact

**All Additional Adults** in your group must sign below, printing their names in the left column and signing their names on the corresponding line in the right column.

**Parents or Guardians** must sign for any child under the age of 18 by printing the child's name in the left column and by signing the parent or guardian's name in the corresponding right column.

Check the "Minor" box if the participant is under the age of 18.

\_\_\_\_\_

Group Name

**Print Name**

**Parent/Guardian Signature**

**Minor**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

