If you're interested in volunteering at The Dalles Civic Auditorium, please complete the following form and return it to: Volunteer Coordinator, The Dalles Civic Auditorium, PO Box 1102, The Dalles, OR 97058

The Dalles Civic Auditorium

Date:		
FIRST NAME:	LAST NAME:	
MAILING ADDRESS:		
Сіту:	STATE:	ZIP CODE:
CELL PHONE:	Номе Рнопе: _	
EMAIL:		
EMERGENCY CONTACT NAME:		
PHONE NUMBER(S):		
special events; about a three hour	ned of ushering opportunities at the theate shift each event).	er (showing patrons to their seats for live concerts, rt, an all-white dress shirt, and all-black dress
I would like to voluntee required.	r at Guest Services prior to live events in t	the Theatre or other events where tickets area
I would like to voluntee	r to help with events or tasks or projects.	
I have skills I would like computer skills, lighting, video/pl		nteer capacity (i.e. theatre maintenance, marketing,
PLEASE SPECIFY:		
	ring at The Dalles Civic Auditorium? If y	you were referred by someone, please include
Questions?	Contact the Volunteer Coordinator at 54	1-298-8533 or Civic@saw.net

FOR OFFICE USE ONLY

Date entered: _____ Initials: ____