



Girls on the Run of the Bay Area

Volunteer Interest Form

Name: _____

Address: _____

City, State, Zip Code: _____

Telephone (home): _____ (cell): _____ (work): _____

Email: _____ T-shirt size: _____

Employer: _____ Occupation: _____

Special Interests/Activities:

What areas are you interested in volunteering? Please select any that apply.

- | | |
|---|---|
| <input type="checkbox"/> Coach | <input type="checkbox"/> Girls on the Run Site Liaison |
| <input type="checkbox"/> Substitute Coach | <input type="checkbox"/> Office Support |
| <input type="checkbox"/> Mentor Coach | <input type="checkbox"/> Lollipop Run Event Volunteer |
| <input type="checkbox"/> Running Buddy | <input type="checkbox"/> Girls on the Run Representative at Fairs/Races |
| <input type="checkbox"/> Community Outreach | <input type="checkbox"/> Group Volunteer Opportunities |
| <input type="checkbox"/> One-time Volunteer Projects
(IT, Accounting, Graphic Design, etc) | <input type="checkbox"/> Special Events (Partner race events, fundraising gala) |

COMMITTEES:

- | | |
|--|---|
| <input type="checkbox"/> Event Planning Committee | <input type="checkbox"/> Sponsorship Committee |
| <input type="checkbox"/> Lollipop Run Planning Committee | <input type="checkbox"/> Grants Committee |
| <input type="checkbox"/> Coach Resource Committee | <input type="checkbox"/> PR & Marketing Committee |
| <input type="checkbox"/> Team Tiara Committee | |

Other: Please list interest areas

Additional Comments:

THANKS FOR YOUR INTEREST IN SUPPORTING GIRLS ON THE RUN!