



## **VOLUNTEER APPLICATION FORM**

Last Name:	First Name:						
Please Print							
Mailing Address:							
611	6			D.I.			
City:	State:	ZIP:		Pno	ne:		
Cell Number:	E-N	1ail Address	:				
Contact me via email? Yes □ No □							
Any Restrictions/Limitations?							
(Volunteers may be required to lift up to 25lbs, walk ½ mile to assignment and stand more than 20 mins)							
Golf Shirt Size: Men's □ Women's □ X	s□ sm□	MED □	LG □	XL 🗆	2XL 🗆	3XL□ 4XL□	
Please indicate previous tournament experi	ence:						
What COMMITTEE would you like to <b>Donat</b>	<b>e</b> time to: (che	ck all areas o	of interes	st)			
TRANSPORTATION□ TICKET SALES□ REGISTRATION/CHECK-INS□ HOLE ATTENDANT□ GOLF COURSE RUNNER□							
AVAILABLE FOR: EVENING RECEPTION PARTY (Guest Check-ins Only) ☐ AND/OR							
CELEBRITY GOLF INVITATIONAL							
Do you have a valid driver's license? Ye	s□ No□ S	tate:	Lice	nse No:			
Contact In Case of emergency:			Phoi	ne:			
Relationship to above:							

Complete, mail or email Volunteer Application to:
Grant Fuhr Foundation
Attention: LISA FUHR, Tournament Director
40101 Monterey Avenue, Suite B1 – 310, Rancho Mirage, CA 92270

Phone: 760.902.0090
Email: GF31foundation@gmail.com

ALL VOLUNTEER APPLICATIONS WILL BE REVIEWED AND ACCEPTED BASED ON EVENT NEEDS