

Veterans for Veterans Volunteer Application (Shreveport, LA)

Name:			
Address:			
City	State	Zip Code	
Telephone Home:	Work:	Cell:	
E-mail Address:			
Previous experience: Volunteered before	re at this event?	Yes or No	
Other Volunteering:			
Affiliation (School, Employer, Motor	rcycle Group, Church	Group)	
References (please list two references	ces-Full Name, addre	ss & phone number)	
Place: <u>Veterans for Veterans Car &</u> <u>Margaritaville – Bossier City</u>	<u>& Bike Show Event</u> h	eld at:	
Date & Hours: Saturday 8 AM - 3 PM	Volunteering Activ	vities: or	
Set-up Time: Saturday 6 AM	Face Painting or V	Face Painting or Veterans Day Cards or 5Krun Circle one if interested	
The information provided above is true.			
Signature		Date	

Please return this signed application to:

Veterans for Veterans, Inc. MAILING ADDRESS: 122 Adger Street, Shreveport, LA 71105 Volunteer Questions may be directed to Theresa Neff, 318-564-2765 text or call Vendor questions may be directed to veteransdaybikerevent@yahoo.com Ph: 318 294 9045 Jeremy Neff (text or call)