



**2009 Harbor Half Marathon & Relay
Volunteer Information Form
Sunday, October 18, 2009**

First Name: _____ Last Name: _____

Address: _____ ST: _____ ZIP: _____

Home Phone: _____ Cell Phone: _____

Work Phone: _____

Email #: _____

Company/Organization: _____
(If volunteering with a group)

Shirt Size: Medium Large X-Large XXXLarge (Circle One)

AGE: _____ (min. age 14)

Are you willing to work more than one of the shifts marked? ____ Yes ____ No

I will volunteer for:

Race Packet Stuffing

Packet Pickup

Course Monitors:

Water Stations

Parking

Race Day Packet Pickup

Chip Distribution

Race Site Help

Finish Line

Post Race Food

Awards

VIP Tent

Post Race Tear Down/Clean Up