

Community Health-In-Partnership Services (CHIPS)
8TH ANNUAL RUN/WALK AND COMMUNITY HEALTH FESTIVAL
SATURDAY, APRIL 26, 2008
VOLUNTEER INFORMATION FORM

Please feel free to duplicate this form for others

Name _____

Address _____ **City/State/Zip** _____

Home Phone _____ **Alternative Phone** _____

Email Address _____ **Group/Company Name:** _____

YES! I am interested in volunteering for CHIPS 8th Annual Run/Walk on April 26, 2008. **Tee Shirt Size:** _____

Please check	Volunteer Opportunity	Tasks	Time Commitment*
	Friday, April 25, 2008 1:00 to 4:00	Pick up food, beverages, tables and other equipment. Unload and store.	2-4 hours as available, throughout the day.
Please check	Saturday, April 26, 2008		
	Setup and Security 10 people	Set up for event. Secure grounds.	6:00 a.m. to 10:00 a.m.
	Security and Close 10 people	Keep grounds secure. Take down tables and equipment and store.	9:30 a.m. to 1:30 p.m.
	Registration/Information 25 people needed at start	Sign up all runners, volunteers and visitors to site.	7:00 a.m. to 11:00 a.m.
	Race Route and Event Coordination (Need 100+ people on the race route)	Provide direction on race route, encourage participation. Help serve refreshments to runners and other guests, help keep grounds in order.	7:30 a.m. to 11:30 a.m. (Important to be on site no later than 7:30)
	Food and Beverage Set Up (need 4-6 people for set up only)	Arrive early to prepare coffee and continental breakfast for runners and volunteers. Set up "Goomies" table at finish line. Set up luncheon food line.	6:00 a.m. to 10:00 a.m.
	Food and Beverage Coordination (need 4-6 dedicated servers assisted by vols coming off race route.)	Serve refreshments, restock food and supplies, keep area clean. Clean up.	9:00 a.m. to 1:00 p.m.
	Health Screeners	Facilitate health screenings, hand out information, sign people up for activities.	9:00 a.m. to Noon
	TEAM CAPTAINS (Need 10 captains)	Is the lead volunteer for each of the opportunities listed above. The Race Route needs 3 captains.	Attends pre-event orientation and trains team.

**If you can't commit to the time requested, please indicate what hours you could help.*

I am unable to volunteer at this time. However, please accept my donation in the amount of: \$ _____.
(If contributing by check, please make payable to CHIPS)

Thank you for your support of CHIPS!

Mail or Fax to: CHIPS' 2008 Run/Walk
 2431 N. Grand Blvd., St. Louis, MO 63106
 Tel. 314-652-9231 ext. 20 www.chipsstl.org
 Fax. 314-533-5430 Email: eweyerich@chipsstl.org



Only volunteers who are pre-registered will receive a tee shirt and be able to volunteer the day of the event.