



# 2<sup>nd</sup> Annual Winning from Within Conference

## VOLUNTEER APPLICATION

Full name:	_____	Date:	_____
	<small>Last                      First                      M.I.</small>		
Address:	_____	Phone:	_____
	<small>Street address                      Apt/Unit #</small>		
	_____	Email:	_____
	<small>City                      State                      Zip Code</small>		

### Availability

- I'm available to volunteer for the whole conference
- I'm only available during the following times: \_\_\_\_\_

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- I am at least 18 years old.

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Print Name: \_\_\_\_\_

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Signature \_\_\_\_\_

With my signature, I understand that photos and videos will be taken that I may be in. I understand that DbD will use any/all pictures and videos I am a part of on the DbD social media platform and website.

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- I am not at least 18 years old.

If you're not at least 18, please have your parent/guardian complete the information below.

I \_\_\_\_\_, give permission for \_\_\_\_\_ to volunteer for DbD's 2<sup>nd</sup> Annual Winning Within Conference. I understand that agreeing to this if my son/daughter needs volunteer hours for school, I'll provide the form at the end of the event, I understand that photos and videos will be taken that he/she may be in, and I give permission for them to be posted on DbD's social media platforms and website.

**Email the completed form to: [info@dbdmentoring.org](mailto:info@dbdmentoring.org)**