



Volunteer Form

Main Contact/Organization: _____

Address: _____

Phone: (____) _____ E-mail: _____

Volunteer's Name(s) and ages (*if under 18*):

Please let us know if you're an individual, family or from an organization.

- Clergy/Church Government/Municipal School Club
 Service Club Youth/Social Services Individual
 other _____

When are you available?

- Set-up (*evening prior-TBD or morning of 9am*) Clean-up (*after event 3-4pm*)
 1st (*10am-12:30pm*) 2nd (*12:30pm-3pm*)

What would be your preferred way to help make this year's event SUPER?

- Garbage pick-up Raffle table Traveling Photo Opp (*personal phone*)
 Supervise Kids Area Float/Relief Entertainment other _____

For more information contact us via email at ugsupersaturday@gmail.com
or by phone **Shannon Link** (262) 930-7704 WWW.UGSUPERSATURDAY.COM