



Recreation &
Human Services

Halloween Carnival 2024

Volunteer Form

Contact Information

Name of Organization:

Contact Person:

Address: City/Zip:

Phone: E-mail:

Acknowledgement

Yes, we would like to volunteer in the Halloween Carnival by assisting with:
(Check all that apply)

Operating a Carnival Booth
Name of Booth(s): _____
Number of Individuals: _____

Cash donation to purchase candy & prizes
Amount: \$ _____

Judge costume contest

City of Glendora Recreation & Human Services – Photography/Media Release
The Recreation and Human Services Department may take and use photos of participants for publicity purposes. Photos of participants are used in the City’s activity guide and other media publications. I hereby grant the City of Glendora permission to use my, or if the participant is a minor, the minor’s likeness, name, voice, and words in any broadcast, telecast or print media account of this event or activity free of charge.

Agreement

By signing below, I acknowledge that I have read, understood, and consent to the above checklist.

Signature

Date