

**Bike Virginia**  
Volunteer Information Form  
2009

Name \_\_\_\_\_

Home Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

\_\_\_\_\_

E-mail Address: \_\_\_\_\_

**I am available for (Check all that apply):**

- Friday (6/19)
- Saturday (6/20)
- Sunday (6/21)
- Monday (2/22)
- Tuesday (6/23)
- Wednesday (6/24)

I will bike

I will not bike

**List the areas you would like to volunteer for in order of preference 1 – 8** (please see our website <http://www.bikevirginia.org/volunteer> for job descriptions):

\_\_\_ Bike Smart Virginia

\_\_\_ BVA Store

\_\_\_ Parking

\_\_\_ Registration

\_\_\_ Safety Monitor

\_\_\_ SAG support (\*please complete vehicle info)

\_\_\_ Signage

\_\_\_ Tent City

**Prior Experience:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**\*VEHICLE INFO**  
**I will have a personal vehicle during the event to utilize:**

- Yes
- No

If yes, please complete the following:

- Vehicle Make \_\_\_\_\_

- Vehicle Model \_\_\_\_\_

- I can Transport \_\_\_ people and \_\_\_ bikes.

**After completion of volunteer service, riders are entitled to \$5.00 in Bike Bucks per hour worked. Bike Bucks may be used towards merchandise purchases and/or next year's registration fee.**

**Comments** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Your signature below indicates your commitment to volunteer as listed above. Please sign, date and return by April 15<sup>th</sup>, 2009.

Signature \_\_\_\_\_

Date \_\_\_\_\_

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**Return completed forms by April 15<sup>th</sup>, 2009 via Fax (888-308-9427)  
or Mail to PO Box 675, Norge, VA 23127**