**HEART-MIND SUMMIT**

**His Holiness The Dalai Lama Visit October 2014**

Thank you for your interest in volunteering with the Dalai Lama Center for Peace & Education! We recognize volunteers as a vital resource and depend on your generosity to fulfil our mission.

Please help us to make the best use of your skills and talents as a volunteer by filling out the questions below and ATTACH A COPY OF YOUR RESUME. **Note:** Save filename with your full name in it.

## Contact Information

|  |  |
| --- | --- |
| Name |  |
| Street Address |  |
| City, Province, Postal Code |  |
| Home Phone |  |
| Mobile |  |
| E-Mail Address |  |

## Emergency Contact Information

|  |  |
| --- | --- |
| Name & Relationship |  |
| Contact Phone |  |

## Personal Information

|  |  |
| --- | --- |
| Languages |  |
| Education |  |
| Professional Certificates |  |

## Availability for Event

**All Volunteers MUST be available for training sessions and willing to educate themselves in the activities of the Dalai Lama Center**

* **Session 1 – Thursday Sept 11 *or* Thursday Sept 18**
* **Session 2 – Wednesday Oct 1 *or* Thursday October 2**
* **Session 3 – Monday Oct 20**

## Please tell us in a few words why you would like to volunteer with the Dalai Lama Center:

|  |
| --- |
|  |

## Please indicate your T-shirt size

**Women’s**   S  M  L  XL OR **Men’s**  S  M L  XL

## Please indicate in order of priority (1 = first choice, etc.) how you would like to help:

|  |
| --- |
| **Pre-event Administration and Preparation**  (Available during period Sept through 21-Oct) |
| **Foyer Floaters / Valet Greeters**  (Oct 21 availability — will require standing, use of stairs and walking distances) |
| **Event Ushers and Hosts**  (Oct 21 availability — will require standing, use of stairs and walking distances) |
| **Media Room Support**  (Oct 21 availability — will require skills troubleshooting AV equipment & and walking distances) |

## Security

If necessary are you be willing to submit to a criminal record check? Yes\_\_\_\_ No\_\_\_\_

## Agreement and Signature

### By submitting this application, I affirm that the facts set forth in it are true and complete.

|  |  |
| --- | --- |
| Name (printed) |  |
| Signature |  |
| Date |  |

**Parent / Guardian to print name and sign here if volunteer is under 19 years of age:**

|  |  |
| --- | --- |
| Name (printed) |  |
| Signature |  |
| Date |  |

## Privacy Policy

The Dalai Lama Center for Peace and Education (DLC) collects and uses the personal information that you provide only to support your involvement as a DLC volunteer and to maintain future contact with you regarding the Dalai Lama Center. The DLC is committed to respecting your privacy and protecting your personal information and will not share or distribute your information with any third party without your permission, except as required by law or in a medical emergency. If you have concerns about your privacy, please contact the DLC Managing Director.

**Please email your completed volunteer application form before Monday September 1st, 2014 to:** [tcotton@dalailamacenter.org](mailto:tcotton@dalailamacenter.org)

**Thank you for your interest in helping the Dalai Lama Center for Peace and Education.**