



GLASS ART SOCIETY  
39TH ANNUAL CONFERENCE  
CORNING • NEW YORK

# Volunteer/ Work Exchange

## sign up

### June 11-13, 2009

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip/Postal Code \_\_\_\_\_

Country \_\_\_\_\_

Telephone \_\_\_\_\_ Fax \_\_\_\_\_

Email \_\_\_\_\_ Web Site \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Emergency Phone \_\_\_\_\_

Non-Student     Student (include a photocopy of student ID)

**Work Exchange 12 Hours**

Team Leader

**Volunteer: \_\_\_\_\_ hours**

Team Leader

**Check Days time periods you prefer to work.**  
(Shifts average 3-6 hours)

Day	Morning	Afternoon	Evening
Mon, June 8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tues, June 9	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Wed, June 10	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Thur, June 11	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fri, June 12	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sat, June 13	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sun, June 14	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please list the areas of interest you would like to fill.  
Select from the Volunteer/Work Exchange Job  
Descriptions Memo, i.e. Registration, Exhibitions, etc.

1st Preference \_\_\_\_\_

2nd Preference \_\_\_\_\_

3rd Preference \_\_\_\_\_

Have you attended a GAS conference before?

Yes \_\_\_\_\_  No

Have you volunteered or completed Work Exchange  
before?

Yes \_\_\_\_\_  No

Any Special Skills?

Yes \_\_\_\_\_  No

If Yes what? \_\_\_\_\_

Do you have audio visual experience?

Yes \_\_\_\_\_  No

Can you do light construction / heavy lifting?

*(Monday-Wednesday shifts tend to have some lifting)*

Yes \_\_\_\_\_  No

Do you have any special needs?

*(wheelchair access, etc.)*

Yes \_\_\_\_\_  No

English is your:

Native language     Bi-lingual

List other languages you speak:

\_\_\_\_\_

Are you willing to serve as a translator?

Yes \_\_\_\_\_  No

Would you like to work with another specific

volunteer / Work Exchange applicant?

Yes \_\_\_\_\_  No

If Yes who? \_\_\_\_\_

Any other comments or notes:

Mail, fax or email your application or questions to:

**Work Exchange 2009**  
**Glass Art Society**  
**6512 23<sup>rd</sup> Ave NW, Ste 329**  
**Seattle, WA 98117**

Fax: **206-382-2630**

Email: **info@glassart.org**

You will be notified by email or  
regular mail within three weeks regarding acceptance.