



## 2020 Flowers Sea Swim

Saturday 13th June

&/Or Monday 15th June

### Volunteer Expression of Interest

<b>Surname:</b>		<b>First name:</b>	
<b>Address:</b>			
<b>Telephones:</b>	Home: Work: Cell:		
<b>Email:</b>			
<b>Skills you would like to put to use in the Flowers Sea Swim:</b>			
<b>Volunteer position(s) you are interested in:</b>			
<b>Have you volunteered for the Flowers Sea Swim previously?</b>		If so, in what capacity?	
<b>When are you available:</b>	<input type="checkbox"/>	Daytime	<input type="checkbox"/>
		Evening	<input type="checkbox"/>
		Weekdays	<input type="checkbox"/>
		Weekends	<input type="checkbox"/>
	<input type="checkbox"/>	<b><i>Before the race</i></b>	
	<input type="checkbox"/>	<b><i>Day of race</i></b>	
<b>Age:</b>			<b>Shirt size:</b>
<b>Medical:</b>	Do you have any medical conditions we should be aware of? If Yes, please provide details.		
<b>Emergency contact:</b>	<b>Name:</b>		<b>Phone:</b>

Please return completed Expression of Interest form to the Flowers Sea Swim:

Email: [info@flowersseaswim.com](mailto:info@flowersseaswim.com)

Fax: 949-0595

Telephone: 623-0000