

BAILACURA MEMBER APPLICATION FORM

If you have special skills and are seeking to get more involved with your community, we are always on the lookout to add to our planning team. We are looking for help in the following positions:

- Event/logistics planners
- Social media/advertising
- Video/photography
- Fundraising/sponsorships

Date _____

Name _____

Address _____

City _____

State _____

Zip _____

Phone: _____

E-mail: _____

SECTION I

Previous Volunteer Experience:

Occupation (Past occupation if retired):

Other information that will help us make a good match (such as education, general interests/hobbies):

Languages Spoken:

SECTION II

Please provide availability and volunteer assignment preferences:

SECTION III

All information on this form will be used only by BailaCura and will not be shared with a third party. The purpose of this form is to assess the eligibility of applicants to the needs of the organization and a member position is not guaranteed. Members do not receive monetary compensation and are not guaranteed any other form of compensation. Members are a critical part to the success of the organization and support the mission and vision of the organization. Membership is approved by the Board of Directors and will be assigned a role and responsibility that are year-round. This application is NOT for volunteering during the annual BailaCura Festival and Gala and is considered separately. By signing, I understand the information above, understand the work requirements, and agree for BailaCura to contact me regarding potential membership.

Signature of Applicant: _____ Date: _____