



Staff Registration Form

Name: _____

Contact Details:

Mailing Address: Street: _____

City: _____ State: _____ Zip: _____

Phone: (day): _____ Alt phone: _____

Email: _____

T-shirt Size: S M L XL 2XL 3XL
Long Sleeve Short Sleeve

(*one t-shirt will be issued for each full day worked)

I am able to work: (check what applies)

| | | | | | |
|------------|------------|------------|------------|------------|------------|
| TUE | WED | THU | FRI | SAT | SUN |
| ALL | ALL | ALL | ALL | ALL | ALL |
| <i>or</i> | | | | | |
| AM | AM | AM | AM | AM | AM |
| PM | PM | PM | PM | PM | PM |

Area I wish to work: (check all that apply)

| | | |
|-----------------------|---------------|----------------------|
| <i>Administration</i> | <i>Course</i> | <i>Scrutineering</i> |
| Front Gate | Pre-Staging | Inspection |
| Merchandise Sales | Starter | Impound |
| Registration | Spotter | |
| Assistant (runner) | Impound | |

Fax: 530-477-6386, Mail: 180 Spring Hill Dr, Grass Valley, CA 95945, Email

OFFICE USE ONLY:

Work Area(s): _____

Added to staff list
 Staff Info issued
 Hotel reserved
 Meal Allowance \$ _____
 T-Shirt(s) issued
 Med Form received

Notes: