



## Fans in the Stands:

Have you ever been in a serious competition? Fans encouraging you toward the finish line make a HUGE difference!

Create posters, banners and noise makers . . . Register to come support Special Olympics Georgia Indoor Winter Games athletes as Fans in the Stands!

Please complete this application in its entirety and submit to April Aiken, Volunteer and Event Manager.

### To Submit Application:

#### Mail:

Special Olympics Georgia  
Attn: April Aiken  
4000 Dekalb Technology Parkway  
Building 400, Suite 400  
Atlanta, GA 30340

#### Fax:

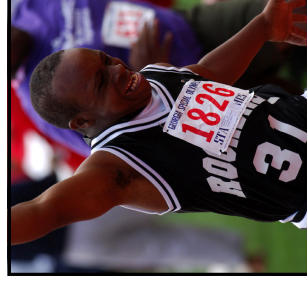
770.216.8339

#### E-mail:

[april.aiken@specialolympicsga.org](mailto:april.aiken@specialolympicsga.org)



## 2007 State Indoor Winter Games



## Our Volunteers Bring Great Joy!



April Aiken

Volunteer and Event Manager

770.414.9390, ext. 120

[april.aiken@specialolympicsga.org](mailto:april.aiken@specialolympicsga.org)

Special Olympics Georgia

2007

## State Indoor

## Winter Games

### Volunteer Application



January 19 - 21, 2007

Thank You Volunteers!

You make the Games possible.



Many thanks to Chick-fil-A for their continued commitment and support of our volunteers.

Please circle the sports of your interest.

- Basketball
- Gymnastics
- Roller Skating
- Bowling
- Ice Skating
- Floor Hockey
- Power Lifting

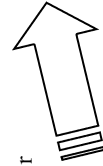
### You Need To Know . . .

- Volunteer Placement is limited and determined on a first come, first serve basis. A submitted application does not guarantee a volunteer position.
- Step by Step:
  - Complete and return (via e-mail, fax or mail) this application.
  - You will receive a volunteer handbook (via e-mail or mail), including: your assignment, directions and specific details for the weekend by January 5, 2007.\*
  - Is this your first time volunteering with Special Olympics Georgia (SOGA)? New volunteers are asked to attend a volunteer orientation that will be held in January. Date and time will soon be announced.

\*To ensure receipt of a volunteer handbook by January 5, 2007, please return this application by Friday, December 29, 2006.



Please select up to 5 of the approximate volunteer times, with #1 representing your first choice, #2 representing your second choice, etc. #5 will represent your last choice. The exact volunteer time shift will not be available until January 5th, posted in the volunteer handbook.



Please legibly print all answers.

First and Last Name:

Mailing Address:

Street -

City, State -

Zip Code -

Preferred E-mail:

Phone Numbers:

Cell -

Home -

If registering on behalf of a group:

Group Name -

Approximate # of Volunteers -

Friday - January 19	Saturday - January 20	Sunday - January 21
<input type="checkbox"/> 7:30 am - <input type="checkbox"/> 12:30 pm	<input type="checkbox"/> 7:30 am - <input type="checkbox"/> 12:30 pm	<input type="checkbox"/> 7:30 am - <input type="checkbox"/> 12:30 pm
<input type="checkbox"/> 12 noon - <input type="checkbox"/> 5:00 pm	<input type="checkbox"/> 12 noon - <input type="checkbox"/> 5:00 pm	<input type="checkbox"/> 12 noon - <input type="checkbox"/> 3:00 pm
<input type="checkbox"/> 4:30 pm - <input type="checkbox"/> 9:30 pm	<input type="checkbox"/> 4:30 pm - <input type="checkbox"/> 9:30 pm	<input type="checkbox"/> N/P. Any day, Any time.