Volunteer Registration

Thank you for contributing to ATHS and helping us make this year's event a great success! When signing up, please make sure to keep in mind your preferred days and times, any potential health or physical limitations, and any scheduling conflicts with other activities you plan to attend.

Volunteer schedules will be distributed once finalized. If you have any questions or need to make a change to your volunteer application, please contact ATHS at (816) 891-9900 or by emailing volunteer@aths.org.

Name			
Address	City	State	Zipcode
Email		Cell Phone	
Shifts	Volunteer Areas:		
SHIFT OPTIONS	1ST CHOICE	2ND CHOICE	3RD CHOICE
 1st Shift 7:15 A.M - 11:30 A.M. 2nd Shift 11:15 A.M 3:30 P.M. 3rd Shift 2:15 P.M - 6:30 P.M. Monday, June 2 1st shift; 2nd shift; 3rd shift Tuesday, June 3 1st shift; 2nd shift; 3rd shift Wednesday, June 4 1st shift; 2nd shift; 3rd shift Thursday, June 5 1st shift; 2nd shift; 3rd shift Thursday, June 5 1st shift; 2nd shift; 3rd shift Friday, June 6 1st shift; 2nd shift; 3rd shift 	ATHS Terminal Camping Area Attendant Children's Area Support Gate Attendant Hospitatlity Loading/Unloading Parking Attendant Transport Show Trucks Photo Support Indoor Outdoor Registration Support Spectator Truck Vendor Truck Wash Attendant Setup/Teardown Support Traffic Flow Support	ATHS Terminal Camping Area Attendant Children's Area Support Gate Attendant Hospitatlity Loading/Unloading Parking Attendant Transport Show Trucks Photo Support Indoor Outdoor Registration Support Spectator Truck Vendor Truck Wash Attendant Setup/Teardown Support Traffic Flow Support	ATHS Terminal Camping Area Attendant Children's Area Support Gate Attendant Hospitality Loading/Unloading Parking Attendant Transport Show Trucks Photo Support Indoor Outdoor Registration Support Spectator Truck Vendor Truck Wash Attendant Setup/Teardown Support Traffic Flow Support
☐ Saturday, June 7 ○ 1st shift; ○ 2nd shift; ○ 3rd shift	Volunteer Support	Volunteer Support	Volunteer Support
Other Items of Consideration Please check all that apply Previously volunteered? Unable to stand for long periods of time Unable to lift over 15-20 pounds Limited computer/typing capabilities	In Case of an Emergency Are there any known health conditions/allergies that medical emergency professionals should be made aware of? Emergency Contact Information: Full Name: Relationship: Cell Phone: Alt. Phone:		