

**MELBOURNE ART FESTIVAL  
COMMITTEE MEMBER  
FACT SHEET – PLEASE PRINT**

**Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **Zip** \_\_\_\_\_

**Day Telephone #:** \_\_\_\_\_ **Evening Telephone #:** \_\_\_\_\_

**Cell Phone #:** \_\_\_\_\_ **E-Mail:** \_\_\_\_\_

**Employer:** \_\_\_\_\_

• **What is your current occupation?** \_\_\_\_\_

• **How did you learn about the Melbourne Art Festival (MAF)?** \_\_\_\_\_

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**Please circle any committees on which you would like to serve:**

5K RUN      ADVERTISING      ART WORKSHOPS      ARTISTS      BEER/WINE      COKE/WATER      DIRECTORY

GRANTS      ICE      KIDSWORLD      JUDGES      OASIS      PARK-N-RIDE      PUBLIC RELATIONS

SCHOLARSHIP      SCHOLARSHIP ART AUCTION      SECURITY      STATISTICS

STUDENT ART WORKSHOPS      STUDENT ART COMPETITION      VOLUNTEERS      ZONE CAPTAINS

• **Anything else about yourself you would like to share with us?** \_\_\_\_\_

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**THANK YOU FOR VOLUNTEERING!**