

BOSTON BALANCE

Spinning® and Fitness Conference

October 28th-30th 2010

VOLUNTEER APPLICATION

First Name _____ Last Name _____ Male Female

Address _____ Apartment # _____

City _____ State _____ Zip Code _____ Country _____

Home Phone _____ Work Phone _____

Cell _____ Email _____

I am a Personal Trainer Group Exercise Instructor What certifications do you hold? _____

There is a mandatory volunteer meeting scheduled for Thursday, October 28th at 7:00pm to be held at the Renaissance Waterfront Hotel.

1. Are you willing to set-up, move and/or break down equipment?

YES NO

2. Please call the hotel and airline directly for your reservations. ECA does not provide accommodations or transportation. Renaissance Waterfront Hotel: (617)-338-4111.

3. Interested in Room Sharing YES NO

Prefer: Male/Female Nights: Thursday Friday Saturday

4. **Schedule:** Work one full day, attend another full day. PLEASE indicate which **day** you are available to work.

CONVENTION SHIFTS:

- Thursday 8am-4pm (set-up equipment)
- Thursday 4pm-11pm (set-up equipment)
- Friday 7am-6pm
- Saturday 7am-7pm
- Saturday 11am-9pm (breakdown)

5. Volunteer Summary: Please make sure you have enclosed the following:

- Days that you can work are indicated
- Complete mailing address and phone number
- "Make the Commitment" section completed.

Contact: Lilli Koppelman – Volunteer Coordinator email: lilli@ecaworldfitness.com or call ECA at (516)-432-6877

“MAKE THE COMMITMENT”

Dear Volunteer,

Please read and fill out the following form carefully.

I agree to fulfill my commitment as a volunteer at the Boston Balance 2010 Spinning® and Fitness Conference the weekend of October 28th-30th held at the Renaissance Waterfront Hotel. In exchange, I will receive a complimentary day of sessions according to my schedule and class availability. As a Volunteer, Boston Balance requires that a major credit card be kept on

file. In the event I attend class sessions without fulfilling my volunteer job descriptions and responsibilities, I give my consent to Boston Balance to charge my credit card in the amount of \$199.00.

Your credit card will not be charged if you cannot volunteer, but only in the event that you attend classes without volunteering. Thank you again for all your support and dedication!

Mastercard Visa

Card # _____

Expiration Date: _____

Print Cardholder Name: _____

Signature Authorization: _____

Today's date: _____

Sincerely,
Lilli Koppelman
Volunteer Coordinator