



CANDIDATE VOLUNTEER APPLICATION PSILORITIS MOUNTAIN RACE

A. CANDIDATE VOLUNTEER BASIC INFORMATION				
Surname:		First Name:		
Father's Name:		Mother's Name:		
Date of Birth:		Place of Birth:		
Address:				
Post Code		Municipality:		
Tel:		Mobile Tel:		
Profession:				
B. CANDIDATE VOLUNTEER KNOWLEDGE				
Basic Education	Primary school		High school	
Basic Education	High school		Technology Foundation	
Studies	University		Technological Institute	
University Name:				
Additional Languages	➤	Use of computers		
	➤	Proficient	Advanced	Lower
	➤	BASIC KNOWLEDGE AS		
	➤	Athlete	yes	no
	➤	Trainer	yes	no
	➤	Climbing	yes	no
		First Aid	yes	no
		Other	yes	no
C. CHOICE OF VOLUNTEER GROUP				
(Each candidate can choice up to three volunteer groups)				
VOLUNTEER GROUPS				CHOICE
1.	Athletes service			
2.	Athletic Information Services			
3.	Statistics – Results			
4.	Transport – Escort			
5.	Event Presentation			
6.	Journalist Services			
7.	Security Groups			
8.	Secretarial Support			
D. VOLUNTARY APPLICANT SIGNATURE				
CANDIDATE VOLUNTEER		FOR CHILD CANDIDATE VOLUNTEER		
NAME/ SIGNATURE		NAME/ SIGNATURE (Father's - Mother's)		
<i>What matters in a race is not the victory but the participation, just as in life what counts is the effort! Thank you for your interest in the PSILORITIS MOUNTAIN RACE</i>				