**2016 One World Festa in Iwate**

Volunteer Application Form

2016／　　　　／

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| Name | | | | | | | Gender | Date of Birth | |
|  | | | | | | | M　　／　　F | Date Month Year  \*This information is required for insurance purposes. | |
| Name of School | | | | | [Children below Junior High School age must receive permission from a parent or guardian. Children below Elementary School age must be accompanied by a parent or guardian.] | | | | |
| Junior High / High School / University  Year: | | | | | As a parent/guardian, I grant permission for my child to take part.  Name of parent/guardian: | | | | Relationship to applicant |
| Address | 〒 |  | | - | |  | | | |
|  | | | | | | | | | |
| Email Address | | | | | | | | | |
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| \* Mobile phone users should make sure to add the International Association's email domain, ＠iwate-ia.or.jp, to their approved senders list, to prevent messages being categorized as spam. | | | | | | | | | |
| Allergies, etc.　 [We provide lunch on the day, so please tell us if you have any dietary restrictions due to allergies, religion, etc.] | | | | | | | | | |
|  | | | | | | | | | |
| Country of origin | | | Additional comments | | | | | | |
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　Terms and conditions

・　If you can no longer take part, please contact us as soon as possible.

・　If we're unable to contact you using the details above, we may remove you from our list of volunteers.

・　You will be covered by the association's event insurance.

・　The association will decide the schedule. It may not be possible to assign you to your preferred role.

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| **▲How to apply▼**  **Iwate International Association**  **Aiina 5F　1-7-1 Moriokaekinishidori, Morioka, Iwate 020-0045**  **TEL　019-654-8900　　FAX　019-654-8922**  **Email　event-iia@iwate-ia.or.jp** |

　Personal Information

Personal information will be handled in accordance with the Iwate International Association's official regulations.

Personal information and photographs taken at the event will be used for the association's events and communications. It will not be shared with a third party without your permission.