



## VOLUNTEER FORM 2017-18

**Volunteer's Name:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip Code** \_\_\_\_\_

**Phone Number** (in case follow-up is needed): \_\_\_\_\_

**Email Address** (in case follow-up is needed): \_\_\_\_\_

**Profession/Employer/School** \_\_\_\_\_

### Preferred Volunteer Role

Judge    Time Keeper    Registration    Food Service    Guest Speaker    Mentor

### Judge Type

**Volunteer**

Thank you for your donation!

**Paid**

Your social security number \_\_\_\_\_

Have you judged for DUDL before? If so, how many rounds: \_\_\_\_\_

Have you judged other debate competitions before? If so, how many rounds: \_\_\_\_\_

What **high school** did you attend \_\_\_\_\_ City, State \_\_\_\_\_

Were you a **high school** debater (Please check all that apply)

Policy    Other kind of Debate    No competitive debate

What **college/university** did you attend \_\_\_\_\_ City, State \_\_\_\_\_

Were you a **college** debater (Please check all that apply)

Policy    Other kind of Debate    No competitive debate

What **graduate school(s)** have you attended/are you attending? \_\_\_\_\_

### Please mark any or all you of the below that you may be interested in:

- joining our **mailing list** (please provide your email address above)
- volunteering to **mentor** one of our schools during the year.
- donating **supplies or food** for DUDL debate practices and events.