



ALUMNI ASSOCIATION

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**2010 Homecoming Volunteer Form  
Saturday, October 9, 2010**

Name \_\_\_\_\_ Department/Organization \_\_\_\_\_

Mailing Address \_\_\_\_\_

Telephone Number \_\_\_\_\_ E-mail Address \_\_\_\_\_

**Please indicate your first, second and third committee preference:**

- |  |  |
|--|--|
| <input type="checkbox"/> Student Activities  | <input type="checkbox"/> Entertainment         |
| <input type="checkbox"/> Parade              | <input type="checkbox"/> Marketing & Promotion |
| <input type="checkbox"/> Homecoming Court    | <input type="checkbox"/> Athletic Relations    |
| <input type="checkbox"/> Community Relations | <input type="checkbox"/> Logistics             |
| <input type="checkbox"/> Door/Raffle Prizes  | <input type="checkbox"/> Hospitality           |
| <input type="checkbox"/> Other _____         |  |

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