

NAVAL AIR STATION OCEANA
2007 Air Show Volunteer Application
(PLEASE PRINT)

PERSONAL DATA

NAME: _____
ADDRESS: _____
CITY: _____ STATE: _____ ZIP: _____
HOME PHONE: (____) _____ MOBILE PHONE: (____) _____ OTHER PHONE (____) _____

EMERGENCY DATA

EMERGENCY CONTACT NAME: _____ EMERGENCY CONTACT PHONE: (____) _____

AIR SHOW EMPLOYMENT INTEREST

DESIRED EMPLOYMENT:

BENEFICIAL PERSONAL SKILLS OR TALENTS:

DAYS OF AVAILABILITY (Please check): (Thu) 07 Sept 06 (FRI) 08 Sept 06 (SAT) 09 Sep 06 (SUN) 10 SEP 06

HOURS OF AVAILABILITY: _____

PERSONAL HEALTH INFORMATION

Please describe any medical conditions or physical limitations you have to assist in proper air show assignment.

I, hereby, declare the above information to be true. Signed: _____ Date: _____

MAILING ADDRESS: NAVAL AIR STATION OCEANA
AIR SHOW VOLUNTEER COORDINATOR
1750 TOMCAT BLVD
BUILDING 230
VIRGINIA BEACH, VA 23460-2168

CONTACT INFO: ETC Thomas Trueblood
(757) 433-3380 OFFICE
(757) 433-2773 FAX
(757) 553-1285 CELL
Air Show Volunteer Information Line: 433-3370

AIRSHOW ASSIGNMENT (STAFF ONLY)

AIR SHOW ASSIGNMENT LOCATION: _____ AIR SHOW JOB DESCRIPTION: _____

AIR SHOW SUPERVISOR: _____ SUPERVISOR PHONE: _____