



CLEARBROOK GUARDIANS – CASINO NIGHT

March 4, 2017

5:00 P.M. – 12:00 A.M.

VOLUNTEER REGISTRATION FORM

Please return by Wednesday, February 15th

NAME: _____

ADDRESS: _____

CITY, STATE & ZIP _____

EMAIL: _____

PHONE: _____

PLEASE CHECK THE VOLUNTEER ASSIGNMENT YOU WOULD PREFER.

These positions require state registration two weeks prior to the event.

(If you gave this information previously, there is no need to complete)

This information is kept confidential.

SOCIAL SECURITY # _____

BIRTHDATE _____

- | | |
|--|---|
| <input type="checkbox"/> BLACKJACK DEALER | <input type="checkbox"/> POKER DEALER |
| <input type="checkbox"/> ROULETTE (7-11 PM) - any position | <input type="checkbox"/> 3 CARD POKER DEALER |
| <input type="checkbox"/> WHEEL | <input type="checkbox"/> MINI PUTT PUTT POKER |
| <input type="checkbox"/> CRAPS (7-11 PM) – any position | <input type="checkbox"/> RELIEF PERSON _____ |

If you would like to be a relief person, please indicate gaming location next to relief box

*These positions **do not** require state registration.*

- | | |
|--|--|
| <input type="checkbox"/> BARTENDER (Online training required) | <input type="checkbox"/> KITCHEN SERVICE |
| <input type="checkbox"/> FOOD/BAR CASHIER (Online training required) | <input type="checkbox"/> RAFFLE |
| <input type="checkbox"/> WAITRESS/WAITER (Online training required) | |

Preferred Shift (check one):

- 5pm to 8:30 pm 7:30 pm to 11:00 pm 8:30 pm to 12am Other _____

Please return this form by February 15th.

**Kathy Scheuing • Clearbrook • 1835 W. Central Road • Arlington Heights, IL 60005
Phone (847) 870-7748 • Fax (847) 870-7741 • Email: kscheuing@clearbrook.org**