



Team Member Application and Agreement Form

Name: _____ Date: _____

***If team members are under 18 years, the parent or guardian must also complete the application and agreement form.**

Name of Parent or Guardian if under 18 years:

Address: _____ Home#: _____

Cell#: _____ Email: _____

Have you been a part of a nonprofit organization?

If yes, name of the nonprofit organization _____

Do you have any Fundraiser(s) experience?

If yes, please list _____

Team Member Signature: _____ **Date:** _____

GALS Approved by: _____ **Date:** _____

Email form to gals2013@aol.com