



## Volunteer Application

### SIGNATURE PAGE

I hereby acknowledge that I have read and understand the attached Volunteer Rules and Requirements for Salinas Valley Comic Con, and agree to comply with the Rules and Requirements. I further acknowledge that failure to abide by the rules of Salinas Valley Comic Con may result in dismissal of my service as a volunteer and revocation of associated privileges.

**SUBMISSION OF THIS APPLICATION DOES NOT GUARANTEE ACCEPTANCE.**

Volunteer Name	Parent or Guardian signature (If under 18)
Print: _____	Print: _____
Sign: _____	Sign: _____
Date: _____	Date: _____

Please send a signed copy via email to: [store@steinbeck.org](mailto:store@steinbeck.org). Copies may also be mailed, or delivered in person, to the National Steinbeck Center at: One Main St., Salinas, CA 93901