



Shakespeare
D A L L A S

Volunteer Registration

Thank you for being an important part of Shakespeare in the Park!

Contact Information

Name: _____

Phone Number: _____ Phone Type: Cell Home Work

E-mail: _____
(scheduling and confirmations are sent via email)

Address: _____

City, State & Zip: _____

What is your level of interest in volunteering?

Shakespeare Helpers _____ Shakespeare Stars _____ Shakespeare Angels _____
(2-4 nights) (5-10 nights) (11+ nights)

Availability (please check all that apply)

Summer Season: _____
Weekday: _____
Weekend: _____

Fall Season: _____
Weekday: _____
Weekend: _____

Preferences:

Please Complete & Return This Form

Shakespeare Dallas
Attn: Volunteer Program
1250 Majesty Dr.
Dallas, TX 75247
214.559.2782 (fax)