



HISPANIC WELLNESS

Dear Volunteer,

It is time for us to roll up our shirt sleeves and plan to spend as much time as we can spare at this year's Hispanic Wellness Fair which is scheduled to occur on Saturday, August 2, 2008. The doors will open to the public at 9:00 a.m. and will close at 3:00 p.m.

In anticipation of your availability to help, we ask that you provide the following information:

Name: _____ Phone: _____

E-mail address: _____

1. **TIME YOU CAN WORK:** The time periods we need coverage is 8:00 a.m. – 3:30 p.m. If you cannot work the entire day, please commit to half the day. Please indicate the shift(s) you are available to work:
 8:00 a.m. – 3:30 p.m. 8:00 a.m. – Noon 11:30 – 3:30 p.m.
2. **MEALS:** We will be providing a light breakfast and lunch for volunteers who work **all** day.
3. **ASSIGNMENT:** If you have a preference of the booth/provider with whom you would like to work, please let us know:
 Counter Guides Immunizations
 Prevent Blindness Interpret Volunteer Registration
 Water distribution Relief person Wherever Needed
4. **BILINGUAL:** Do you speak Spanish? Yes No
If yes, are you willing to Interpret? Yes No

Please return this form via fax, to Lydia Garcia at 817-439-2440. You may also fill this out electronically and send to Miriam.frias@texashealth.org. If you have any questions or for more information contact us at 214-403-3413 or 817-995-9686.

Sincerely,

Volunteer Committee