**Emmanuel Empowerment Ministry**

**Summer Blast Community Day**

**Sponsorship/Volunteer Registration Form**

**I am a: Volunteer \_\_\_Sponsor/Vendor\_\_\_**

**Name of Individual or Business/Ministry completing form: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_cell\_\_\_\_\_\_\_\_\_\_\_\_\_home\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Email\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Business/ Ministry Contact: (Please list one person whom EEM may contact)**

**Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Position: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\*Businesses/organizations with mascots: Will your mascot(s) be appearing? \_\_\_\_\_\_yes\_\_\_\_\_no**

**If yes, what time? (1hour minimum please) from \_\_\_\_\_\_\_\_to\_\_\_\_\_\_\_\_**

**Please indicate how you would be interested in assisting:**

**\_\_\_\_\_donate goods Please specify here if possible: \_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_donate services Please specify here if possible: \_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\*\*Vendors please plan to stay all day if possible. Don’t forget to bring your own table and chairs, or tent/covering, etc.**

**\*\*This section is for volunteers only:**

**\_\_\_\_\_volunteer time \_\_\_ all day\_\_\_\_\_7:30 – 11:30 \_\_\_\_11:30 – 3:00 other time available: \_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**For more information, you may contact EEM at:**

**200 Hillsboro Street**

**Stedman, NC 28391 910-689-4746**

**www.emmanuelempowermentministry.com**