



VOLUNTEER COMMITTEE WORKSHEET

Date: _____

Committee Number: _____

Committee Name: _____

City: _____

State: _____

Committee Officers

Chairman

Name: _____ **I-CAR ID** _____

E-Mail: _____ **Phone:** _____

Vice-Chairman of Training

Name: _____ **I-CAR ID** _____

E-Mail: _____ **Phone:** _____

Vice Chairman of Marketing

Name: _____ **I-CAR ID** _____

E-Mail: _____ **Phone:** _____

Class Administrator

Name: _____ **I-CAR ID** _____

E-Mail: _____ **Phone:** _____

Members

Name: _____ **I-CAR ID** _____

E-Mail: _____ **Phone:** _____

Name: _____ **I-CAR ID** _____

E-Mail: _____ **Phone:** _____

Name: _____ **I-CAR ID** _____

E-Mail: _____ **Phone:** _____

Name: _____ **I-CAR ID** _____

E-Mail: _____ **Phone:** _____

Please fax completed form to 800.329.4277 or email information to volunteer@i-car.com

