**Western Service Learning Days XXVII**

**October 25 ~ 27 Los Angeles, California**

**Speaker Volunteer Information**

Name:

Telephone #: Clean Date:

Area (N.A.) of Region: Email:

|  |
| --- |
| **Please tell us about your Service Experience (Add an “X” after)**  **H&I** Panel Speaker in:   * Prison * Jail * Juvenile Facility * Detox * Treatment * Adolescent * Other |
| Volunteer in:   * Prison * Jail * Juvenile Facility * Detox * Treatment * Adolescent |
| **PI/** Presentation at:   * School * Prison * PTA * Parole/Probation * Public/Professional Org * Other |
| **PR** Booth at:   * Regional Events * Professional Events * Community Events * Other |
| **PL** Volunteer:   * Coordinator * Systems Specialist * Training Coordinator * Other |
| **Web**   * Data Base * Code * Network * Social Network * CMS * Accessibility * Server * Other |
| **SBTW**   * Coordinator * Sponsor * Other |
| **More**   * Activities * YCNA * Treasurer * Executive Body * Chair/V-Chair * Member * Other |

I would like to share my experience in the following type of workshop: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I need a projector? Y N

Please tell us about your Service Experience and any other helpful information: \_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I have done a workshop or have spoken at WSLD in the past (*date*): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Topic: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I would like to be of Service at WSLD XXVII: Y N

Please complete and return to: wsldprogram@todayna.org or by mail to: WSLD27 PO Box 52541 Riverside, CA. 92517. The earlier the better and hopefully by July 1, 2013.

*All submissions become the property of the WSLD XXVII Committee and will not be returned.*