

Graffiti Removal and Intervention Team "GRIT" Application Form 2008

Name: _____

Address: _____

City: _____

State or Province: _____

Postal or Zip Code: _____

Phone: _____

Email: _____

Have you been on a GRIT trip before? Yes_____ No_____ Year(s)_____

In the event that you are chosen for a GRIT Trip, may we release your phone number or e-mail address to the others booked for your trip so you can plan meals?

Phone: Yes_____ No_____ Email: Yes_____ No_____

Availability: Please list trip numbers with dates in order of preference. (example: 1st choice: Trip #4 June 16-20 etc.)

1st Choice: _____

2nd Choice: _____

3rd Choice: _____

Are you available for Standby for the trips indicated? Yes_____ No_____

Are you available for Standby on other trips? Yes_____ No_____

If Yes, please list trip numbers: _____

If the people in your party are returning applications separately, please list their names below to insure that they are booked on the same trip.

Signature: _____