

MT. AMBASSADOR VOLUNTEER INFORMATION

Name: _____

Address: _____

Phone: _____

Email: _____

Are you 18 years of age or older? Yes No

How long have you lived in Central Oregon? _____

How many years have you skied/snowboarded at Mt. Bachelor? _____

How would you rate your skiing ability? _____

How would you rate your snowboarding ability? _____

Are you available to volunteer 5 days a month from December through April? Yes No

Are you available during the following holiday periods?

Dec. 26th – Jan. 2nd Jan. 16th – 18th Feb. 13th – 15th Mar. 22nd – Apr. 9

Why do you want to be a Mt. Ambassador at Mt. Bachelor?

What are your top 3 skills?

What does guest service mean to you?

What is your role in a team setting?

Please return this form along with a current resume to:

Mt Ambassador Program
PO Box 1000
Bend, OR 97709

You can also fax your information to 541-693-0978
or
E-mail hrrassistant@mtbachelor.com