



Volunteer Application

Community Services Department

Volunteer Information:

Name: _____ Email: _____
 Date of Birth: _____ M F Age: _____ Grade Level (if applicable): _____
 Address: _____ City: _____ Zip: _____
 Phone 1: () _____ Phone 2: () _____
 T-shirt Size: _____

Emergency Contact Information:

Full Name: _____ Relationship to Volunteer: _____
 Phone 1: () _____ Phone 2: () _____

Program(s)/Event(s) for which you would like to volunteer:

Summer Playground Seasonal Events (Home Days, Fall Fest, Tree Lighting, etc.)
Youth Programs Social Services (Yuletide Hunger Program, etc.)
Other (please specify): _____

Days/Dates/Times Available: _____

Community Service Hours Needed? No Yes, for _____

Please indicate specific volunteer tasks/areas of interest:

Computer/Technology Working with Children Set Up/Clean Up
Arts & Crafts Entertainment & Music Preparing/Serving Food
Individual Volunteer Work Group Volunteer Work
Other (please list): _____

Past Volunteer Experience and/or References: List 1-3 of your most recent volunteer experiences (if applicable) and/or 1-3 references we may contact who have knowledge of your experiences, character, and/or ability.

Volunteer Project	Organization	Contact Name	Phone

Applicant Signature (or Parent/Guardian if Under 18): _____ Date: _____

*******FOR OFFICE USE ONLY*******

Current waiver on file? Yes No Team Member: _____ Date: _____