

VOLUNTEER APPLICATION FORM

Date: _____

Volunteer Position Desired: _____

Or Event In Which Volunteer Position is Desired: _____

Dates of Volunteer Service From: _____ (Month/Year) To: _____ (Month/Year)

Last Name _____ First Name _____ Middle Initial _____

Street Address _____

City _____ State _____ Zip Code _____

Telephone Numbers: Home _____ Work _____ Cell _____

Email Address: _____ Male _____ Female _____

Emergency Contact: _____

Education

	Number of Years Completed	Diploma/Degree	Major/Minor
High School			
College/University			

Current Employment

Name of Most Recent/Current Employer:

Street Address:

City, State, Zip Code:

Telephone:

Title:

Dates of Service:

Duties:

List one personal reference whom we can contact regarding your experience relevant to this volunteer activity:

Name Street Address, City, State, Zip Code Phone

VOLUNTEER STATEMENT

I understand that I am a volunteer for the Foothills Park and Recreation District and am expected to conduct myself in a professional manner relative to the activity I am participating in. I understand that the use or possession of alcohol or narcotic drugs prior to or during the activity I am volunteering for is prohibited. I further understand that I will not receive any type of compensation for my volunteer services and that I am not covered under Foothills Park and Recreation Districts' Workers' Compensation should I suffer any type of illness or injury. I understand that I will be subject to a background check prior to being allowed to volunteer and will be re-checked periodically based on length of volunteer service (5 years or more).

Signature (Parent's signature if minor)

Date