

# Geneva Park District Volunteer Application



## Contact Information

Name	
Street Address	
City, State, Zip	
Home Phone	
Cell Phone	
E-Mail Address	

## Availability

During which hours are you available for volunteer assignments?

- Weekday mornings       Weekend mornings  
 Weekday afternoons       Weekend afternoons  
 Weekday evenings       Weekend evenings

## Interests

Tell us in which areas you are interested in volunteering

- Special Events  
 Natural Area's Work (seed collections, invasive plant removal, etc.)  
 Youth Athletics/ Coaching  
 Butterfly House

## Special Skills or Qualifications

Summarize special skills and qualifications you have acquired from employment, previous volunteer work, or through other activities, including hobbies or sports.

### Previous Volunteer Experience

Summarize your previous volunteer experience.

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### Person to Notify in Case of Emergency

Name	
Street Address	
City, State, Zip	
Home Phone	
Work Phone	
E-Mail Address	

### Agreement and Signature

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as a volunteer, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal.

Name (printed)	
Signature	
Date	

### Our Policy

It is the policy of this organization to provide equal opportunities without regard to race, color, religion, national origin, gender, sexual preference, age, or disability.

All applicants are required to submit to a background check. A second form will be provided when your application is reviewed.

Thank you for completing this application form and for your interest in volunteering with us.