



VOLUNTEERS FOR SPRINGFIELD PARK, INC.

### VOLUNTEER APPLICATION

Our organization encourages the participation of volunteers who support our mission. If you agree with our mission and are willing to volunteer in our procedures, could you please complete this application? The information on this form will be kept confidential and will help us find the most satisfying and appropriate opportunity for you.

THANK YOU FOR YOUR INTEREST IN OUR ORGANIZATION.

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Employer: \_\_\_\_\_ Position: \_\_\_\_\_

Any special talents or skills you have that you feel would benefit our organization?

\_\_\_\_\_

Interest: Please tell us in which areas you are interested in volunteering:

- Administration
- Events
- Program
- Fundraising
- Communication
- Gardening
- Planting

Please indicate days available: Mon Tues Wed Thurs Fri Sat

Time available: From \_\_\_\_\_ to \_\_\_\_\_

Any physical limitations? \_\_\_\_\_

In case of emergency contact: \_\_\_\_\_

*As a volunteer our organization I agree to abide by the policies and procedures. I understand that I will be volunteering at my own risk and that the organization, its employees or affiliates, cannot assume any responsibility for any liability for any accident, injury or health problem which may arise from any volunteer work I perform for the organization. I agree that all work I do is on a volunteer basis and I am not eligible to receive any monetary payment or reward.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_