



## VOLUNTEER APPLICATION FORM

CONTACT INFORMATION			
<b>Name:</b>			
<b>Address:</b>			
<b>City:</b>		<b>Postal Code:</b>	
<b>Phone Number:</b>	<b>(Home)</b>	<b>(Work)</b>	<b>(Cell)</b>
<b>Email:</b>			
<b>Are you under the age of 13?</b> Yes <input type="checkbox"/> No <input type="checkbox"/>		<b>If Yes, what adult will be accompanying you?</b>	
EMERGENCY CONTACT			
<b>Name:</b>			
<b>Phone Number:</b>			
<b>Relationship:</b>			
REFERENCES			
<b>Please provide three references from present/past employer, past volunteer experience, church etc.</b>			
<b>Name of Reference #1</b>			
<b>Phone Number:</b>			
<b>Relationship to Applicant:</b>			
<b>Name of Reference #2</b>			
<b>Phone Number</b>			
<b>Relationship to Applicant</b>			
<b>Name of Reference #3</b>			
<b>Phone Number</b>			
<b>Relationship to Applicant</b>			

