

PERINTON RECREATION AND PARKS VOLUNTEER APPLICATION FORM

1350 Turk Hill Road
Fairport, New York 14450
(585) 223-5050

NAME _____ PHONE _____

ADDRESS _____ CITY _____ ZIP _____

PLACE OF EMPLOYMENT _____

Brief description of job and length of time employed: _____

IF A STUDENT, SCHOOL AND GRADE LEVEL: _____

WHY ARE YOU INTERESTED IN VOLUNTEERING? _____

Will you need your hours documented? YES _____ NO _____

ANY PREVIOUS EXPERIENCE? _____

ANY SPECIAL SKILLS OR INTERESTS: _____

I am interested in volunteering in the following areas:

- | | |
|--|--|
| <input type="checkbox"/> Working with preschoolers | <input type="checkbox"/> Working with senior citizens |
| <input type="checkbox"/> Working with Kindergarten-5 th grade | <input type="checkbox"/> Driving van for senior citizens |
| <input type="checkbox"/> Working with 6 th to 8 th graders | <input type="checkbox"/> Senior Advisory Committee |
| <input type="checkbox"/> Working with High Schoolers | <input type="checkbox"/> Desk help in Senior Lounge |
| <input type="checkbox"/> Youth Advisory Committee | <input type="checkbox"/> Kitchen help for senior lunches |
| <input type="checkbox"/> Youth Soccer | <input type="checkbox"/> Teach a craft or skill |
| <input type="checkbox"/> Adult Drop-in programs | <input type="checkbox"/> Help with special events |
| <input type="checkbox"/> Swimming | <input type="checkbox"/> Other |
| <input type="checkbox"/> Summer Playground Program | |

I am available at the following times:

Mornings _____ Afternoons _____ Evenings _____ Weekdays _____
Weekends _____ I am flexible _____ My free time varies _____

Frequency of service: please circle any that apply:

Weekly _____ Monthly _____ On call _____ special programs/activities _____

Do you wish to put a time limit on your commitment? Specify _____

Do you have a valid driver's license? YES _____ NO _____

REFERENCES: Please list at least two, with addresses and phone numbers.

1. Name _____ Phone _____
Address _____ City _____ Zip _____
Relationship _____

2. Name _____ Phone _____
Address _____ City _____ Zip _____
Relationship _____

In case of emergency, please notify (list name, relationship and phone number)

As a volunteer, I will make every effort to keep each appointment given me for Volunteer Service. If unable to keep an assignment, I will notify the proper person ahead of time. I will adhere to the Policies and Procedures of the Perinton Recreation and Parks Department.

Signed _____ Date _____

Office Use: References _____
Orientation _____
Training _____