



Volunteer Application

The Boulder Creek Recreation and Park District appreciates your interest in its Volunteer Program. To provide a clear understanding of your background and desire to serve as a volunteer, please complete all the questions below. All information will be kept confidential. District volunteers shall not be entitled to any compensation, health or life insurance or other employee benefits.

Name: _____ Birth date: _____

Residence Address: _____

Mailing Address: _____

Home Phone: _____ Business Phone: _____

Email Address: _____

Do you have any physical condition or handicap which would limit your ability to perform certain volunteer assignments: YES NO

If so please explain:

Have you ever been convicted of a crime, imprisoned or placed on probation? YES NO

If yes, please state the nature of each offense, the date of conviction and the disposition. (A conviction will not necessarily disqualify an individual from the Volunteer Program.)

Education Completed: Elementary School

Middle School YES NO

High School YES NO

College YES NO

Other _____

Circle 1-5 1 being little interest and 5 being interested:

Volunteering with a youth organized program Not interested 1 5 Yes interested

Volunteering in the office Not interested 1 5 Yes interested

Volunteering in outdoor park projects Not interested 1 5 Yes interested

Are you looking for short or long term volunteer work? SHORT LONG TERM

Would you like to be added to our Special Events Volunteers Group? YES NO

Specialized training/ skills you may be able to offer to BCRPD or BC community partners:

Office Skills

Volunteer Experience

Are you interested in a particular volunteer assignment? YES NO

If yes, please specify:

In case of emergency, please contact:

Name

Relationship

Phone#

I certify that all statements on this application are true and complete to the best of my knowledge.

Further, I understand that as a volunteer, I am offering my services of my own free will without expectation of compensation, health or life insurance, or other employee benefits of any kind.

Applicant's Signature

Date

Guardian/ Parent Signature (under 18)

Date

