



Volunteer Application

Applicant Information

Name _____ Birth Date ____/____/____
Address _____ City _____
Zip _____ Cell Phone (_____) _____
Alternate or Home Phone (_____) _____
Volunteer's E-Mail Address: _____

Emergency Contact Name _____
Relationship _____ Emergency Phone (_____) _____
Alt. Emergency Phone (_____) _____

School Information for Service Learning Hours

Are you volunteering for school credit? YES NO
If yes, how many hours do you wish to obtain with our department? _____
By what date do the hours need to be completed? _____

Name of School or College (If applicable) _____

In conjunction with a club/organization? YES NO
If yes, name of club/organization: _____

Please tell us briefly the reason you wish to be a volunteer / how you can benefit the
Town of Carrboro _____

Have you volunteered in the past with the Carrboro Recreation and Parks? YES NO
If yes, in what capacity with that event/program (i.e., youth coach, special events, etc.)?

If you desire to work a special event - please complete the next 2 questions:

1. Note: Hours for special events vary. Are you flexible with your availability?
(Please Circle)
YES NO
2. The need for assistance at special events may vary in nature. Do you have any experience or interest that could be considered in your assignment?

If you desire to coach a youth team - please complete the next 3 questions:

1. Select the coaching opportunity that you are applying for: (Please Circle)
Any Spring Girls Girls Fall Youth
Baseball Baseball Field Volleyball Baseball Basketball
Hockey
2. Which age group would you prefer to work with? (Please Circle)
Any 8 and 9 and 10 11 and 12 Teen
under year olds year olds year olds Ages
3. Please list any previous experience with the sport as a player or coach.

If you desire to work a summer camp - please complete the next 2 questions:

1. If applicable - which age group would you prefer to work with: (Please Circle)
Any 3-5 6-9 9-12 Teen
year olds year olds year olds
2. Summer camps are held in the mornings and/or afternoons, during the weekdays.
Are you available for AM, PM, or both? (Please Circle)
AM PM BOTH

If you wish to volunteer for an opportunity not listed above, please complete the following questions.

1. What are your interests? (Making flyers, filing papers, working with Senior Citizens, working with people with special needs, art, music, etc...)

2. How often would you like to volunteer? (Please Circle)

1-2 times per week or fewer	3-4 times per week	A few days monthly	As Needed
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Do you have any questions about volunteering with the Town of Carrboro's Recreation and Parks Department?

REFERENCES:

(Please provide references that can attest to any related work/volunteer experience)

NOTE: If unable to provide work related or volunteer references, please use personal (non-family) references that can attest to your ability to work with the public.

1		Email:	Phone#
2		Email:	Phone#
3		Email:	Phone#

TOWN OF CARRBORO, NORTH CAROLINA, VOLUNTEER WAIVER FORM

I, the undersigned volunteer for the Town of Carrboro, North Carolina Recreation and Parks Department, hereby acknowledge that I am participating as a volunteer in the _____ Program with the Carrboro Recreation and Parks Department, and that I am not an employee of the Town of Carrboro, or its Recreation and Parks Department. I acknowledge that there is a risk of physical injury that are associated with some activities of the Carrboro Recreation and Parks Department, and I hereby agree to waive and hold the Town of Carrboro and its Recreation and Parks Department harmless from any claims for damages due to any injury I may suffer during the course of my volunteer activities. I also specifically acknowledge that as a volunteer, I am not entitled to worker's compensation from the Town of Carrboro for any injuries I may suffer during the course of my volunteer activities.

(Please sign) _____ Volunteer
(Parent/Guardian signature if volunteer is under 18 years)

This the _____ day of _____, 20_____.

***If your application is accepted, the Carrboro Recreation and Parks Department may conduct a Criminal Background Check, based on the nature of the program or event.*

Please return this form to:

Carrboro Recreation and Parks Department
Attention: Volunteer Inquiry
100 North Greensboro Street
Carrboro, NC 27510