



**BRUNSWICK PARKS AND RECREATION DEPARTMENT**

**VOLUNTEER INFORMATION SHEET**

**ACTIVITY:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**NAME:** \_\_\_\_\_ **MALE:** \_\_\_\_\_ **FEMALE:** \_\_\_\_\_

**HOME PHONE:** \_\_\_\_\_ **WORK PHONE:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**CITY:** \_\_\_\_\_ **COUNTY:** \_\_\_\_\_ **ZIP:** \_\_\_\_\_

**NAME OF PROGRAM FOR WHICH YOU ARE VOLUNTEERING:** \_\_\_\_\_

**LEAGUE OR AGE PREFERENCE:** \_\_\_\_\_

**SHIRT SIZE:** \_\_\_\_\_

**Thank you for volunteering with the Brunswick Parks and Recreation Department.  
Your time and effort will help us make a difference in our community.**

BRUNSWICK MULTI-PURPOSE CENTER  
VOLUNTEER APPLICATION

NAME: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

TELEPHONE NUMBERS: SOCIAL SECURITY NUMBER: \_\_\_\_\_

HOME: \_\_\_\_\_

CELL: DRIVER'S LICENSE NUMBER: \_\_\_\_\_

WORK: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_

EMERGENCY CONTACT (Two Please)

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

TELEPHONE NUMBER: Home \_\_\_\_\_ Cell \_\_\_\_\_ Work \_\_\_\_\_

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

TELEPHONE NUMBER: Home \_\_\_\_\_ Cell \_\_\_\_\_ Work \_\_\_\_\_

DAYS AND HOURS AVAILABLE:

VOLUNTEER WORK YOU WISH TO DO

WHICH PROGRAM: CONGREGATE MEALS \_\_\_\_\_ ADULT DAY CARE: \_\_\_\_\_

AREAS OF INTEREST: (HOBBIES, LEISURE, WORK)

HAVE YOU EVER BEEN CONVICTED OF A CRIME? YES \_\_\_\_\_ NO \_\_\_\_\_

IF YES PLEASE EXPLAIN: DATE: \_\_\_\_\_

CONVICTION:

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PLEASE PROVIDE TWO PERSONAL OR PROFESSIONAL REFENCES:

NAME: \_\_\_\_\_

TELEPHONE NUMBER: Home \_\_\_\_\_ Cell \_\_\_\_\_ Work \_\_\_\_\_

ADDRESS: \_\_\_\_\_

NAME: \_\_\_\_\_

TELEPHONE NUMBER: Home \_\_\_\_\_ Cell \_\_\_\_\_ Work \_\_\_\_\_

ADDRESS: \_\_\_\_\_

**I UNDERSTAND THAT I GIVE PERMISSION FOR THE STAFF OF THE BRUNSWICK MULTI-PURPOSE CENTER TO ASK ME AT ANY TIME DURING THE NORMAL WORKING HOURS TO VOLUNTEER FOR THE VOLUNTEER JOBS I HAVE LISTED. I UNDERSTAND THAT IF I'M PHYSICALLY UNABLE TO PERFORM THE LISTED JOBS I WILL BE EXCUSED.**

**I UNDERSTAND THAT THE CITY OF BRUNSWICK WILL CONDUCT A BACKGROUND CHECK PRIOR TO MY VOLUNTEERING.**

SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_