

Fort Hawkins Volunteer Application



Fort Hawkins encourages the participation of volunteers who support our mission. If you agree with our mission and are willing to be interviewed and trained in our procedures, we encourage you to complete this application. The information on the form will be kept confidential and will help us find the most satisfying and appropriate volunteer opportunity for you.

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Other organizations you volunteer with: _____

Any special talents or skills you have that you feel would benefit our organization? _____

Interests: Please tell us in which areas you are interested in volunteering

Administration

Events

Programming

Fundraising

Maintenance

Docent

Beautification

Website/ Social Media

Please indicate days available: Mon Tues Wed Thur Fri Sat Sun

Times available: From _____ to _____

Any physical limitations? _____

In case of emergency contact: _____

As a volunteer of Fort Hawkins I agree to abide by the policies and procedures. I understand that I will be volunteering at my own risk and that the organization, its employees and affiliates, cannot assume any responsibility for any liability for any accident, injury or health problem which may arise from any volunteer work I perform for the organization. I agree that all the work I do is on a volunteer basis.