¹Hazel Crest Park District



Volunteer Application

2600 West 171st Street •Hazel Crest, IL 60429 Telephone (708) 335-1000 • Fax (708) 335-4990

Date:/
Contact Information
Name
Street Address
City ST ZIP Code
Home Phone
Work Phone
E-Mail Address
Availability
During which hours are you available for volunteer assignments?
Weekday mornings Weekend mornings Weekday afternoons Weekend afternoons Weekday evenings Weekend evenings
Interests
Tell us in which areas you are interested in volunteering
Administration Events (Freedom Festival, Back to School Parade, Concerts, etc) Field work Fundraising Deliveries Phone bank Newsletter production Volunteer coordination

¹ S:Administration/Forms/VolunteerApplication Revd: 05-10-2012

Special Skills or Qualifi	cations	
Summarize special skills and qualifications you have acquired from employment, previous volunteer work, or through other activities, including hobbies or sports.		
Previous Volunteer Exp	perience	
Summarize your previous vo	lunteer experience.	
Person to Notify in Case of Emergency		
Name		
Street Address		
City ST ZIP Code		
Home Phone		
Work Phone		
E-Mail Address		
Agreement and Signati	ure	
By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as a volunteer, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal.		
Name (printed)		
Signature		
Date		

Our Policy

It is the policy of this organization to provide equal opportunities without regard to race, color, religion, national origin, gender, sexual preference, age, or disability.

In accordance with Policy 3.7.B. Volunteers of the Hazel Crest Park District are subject to the work rules, checks, screening, and policies as defined in the Hazel Crest Park District Employee Handbook.

Thank you for completing this application form and for your interest in volunteering with us.