

## VOLUNTEER REGISTRATION FORM

*(Please Print)*

Name: \_\_\_\_\_ Birthdate: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: (Home) \_\_\_\_\_ (Work) \_\_\_\_\_ (Cell) \_\_\_\_\_

Education: High School: \_\_\_\_\_ Years College: \_\_\_\_\_ Years

Work Experience: \_\_\_\_\_  
\_\_\_\_\_

Volunteer Experience: \_\_\_\_\_  
\_\_\_\_\_

Special Interest, Hobbies, Skills: \_\_\_\_\_  
\_\_\_\_\_

Times Available: \_\_\_\_\_

- Situations arise with City departments that require employees and volunteers to deal with confidential information. Volunteers are encouraged to maintain the utmost professionalism when dealing with information and records that are of a confidential nature.
- I have had the opportunity to review the VIA Program with the Volunteer Coordinator, and I am prepared to work at least **four** hours weekly for a minimum period of three months at the same volunteer assignment or combination of assignments listed in the VIA files. (Exceptions will be considered.)

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

In Case of Emergency, Please Contact: \_\_\_\_\_

Telephone: \_\_\_\_\_