

## **Parks Volunteer Application**

<b>Contact Information</b>		
Name		
Current Street Address		
City, State, Zip Code		
Home Phone		
Cell Phone		
E-Mail Address		
Availability		
During which hours are yo	u available for volunteer assignments?	
Weekday mornings	Weekend mornings Holidays	
Weekday afternoons	Weekend afternoons Preferred # of hours/week?	
Weekday evenings	Weekend evenings	
Interests		
Tell us in which areas you are interested in volunteering (please check all that apply)		
Paddle Programs (Stand-up paddleboard, kayak, & canoe)		
Archery Programs		
Geocaching Programs		
Fishing Programs		
Logrolling Programs		
General Summer Camps (group management, general recreation programs)		
Winter Programs (Cross country skiing, snowshoeing, shelter building, etc.)		
Survival & Teambuildi	ng Groups	
Special Events		
Conservation Steward	Iship (removing invasive species, tree planting, park clean-up, etc.)	
Maintenance Tasks (as	ssistance maintaining structures, painting, snow/leaf control, boardwalk repair etc.)	
Maple Syrup Demons		
Maple Syrup Boils & C	Collection (assist in the reduction of sap into maple syrup)	
Equipment Repair (arch		
Nature, Campground & Campfire Programming (including nature hikes, campfire stories, campground crafts)		
Newsletter contributions		
Adult-only programs		
Other Please Describe		

## **Please Submit Application to:**

Carver County Parks 11360 Hwy 212, Suite #2 Cologne, MN 55322

Special Skills or Qualifications		
Summarize special skills and qualifications you have acquired from employment, previous volunteer work, or through other activities, including hobbies or sports.		
Previous Volunteer E	ynerience	
Summarize your previous	•	
Summanze your previous	s volunteer experience.	
Person to Notify in Ca	ase of Emergency	
Name		
Street Address		
City, State, ZIP Code		
Home Phone		
Cell Phone		
E-Mail Address		
Agreement and Signa	ature	
	ation, I affirm that the facts set forth in it are true and complete. I understand that if I am	
accepted as a volunteer, application may result in	any false statements, omissions, or other misrepresentations made by me on this my immediate dismissal.	
Name (printed)		
Signature		
Date		
Thank youl		

## Inank you!

Thank you for completing this application form and for your interest in volunteering with us! We will get back with you about available opportunities within two weeks. Some volunteers must successfully pass a background examination depending on the nature of their volunteer position. Please contact us with any questions or concerns.

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