

APPLICATION FOR VOLUNTEER SERVICE - Minors

Please be advised that you must be at least 14 years of age to volunteer.

Name: _____

Address: _____

City/State: _____ Zip Code: _____

Home Phone: (_____) _____ Cell: (_____) _____

Email: _____ Birthdate: _____/_____/_____

I am available (check all that apply): Weekdays Weekends Year round

Winter Spring Summer Fall Mornings Afternoons Evenings

Emergency Contact Name: _____ Phone: (_____) _____

References:

a) Name: _____ Relationship: _____ Phone: (_____) _____

b) Name: _____ Relationship: _____ Phone: (_____) _____

1) Previous volunteer experience: _____

2) Is this a community service requirement? Yes No

If yes, how many hours are needed? _____ Deadline for completion of hours: _____

3) What types of volunteer opportunities interest you? Please check all that apply:

- | | |
|---|---|
| <input type="checkbox"/> Garden maintenance | <input type="checkbox"/> Invasive species removal |
| <input type="checkbox"/> Assisting naturalists with programs | <input type="checkbox"/> Canoe and kayak assistance |
| <input type="checkbox"/> Special events | <input type="checkbox"/> Research projects/field work |
| <input type="checkbox"/> Maple sugaring (<i>late Jan thru late Feb</i>) | <input type="checkbox"/> Front desk host |
| <input type="checkbox"/> Administrative duties | <input type="checkbox"/> Live animal care |

4) Briefly explain why you want to volunteer at the Environmental Education Center: _____

_____ Signature of Applicant	Date: _____
_____ Signature of Parent/Guardian	_____ Printed Name of Parent/Guardian

For more information or to return a completed form, please contact: Jane Bodnar, jcbodnar@scparks.org, ext. 5323



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