

Hot Springs Parks and Trails Volunteer Application

DATE: _____

NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____ PHONE: _____

EMAIL: _____ PHONE: _____

ORGANIZATION/GROUP (if applicable):

SKILLS (For example: computers, trimming, gardening, painting, officiating)

EXPERIENCE (For example: teacher, camp counselor, event staff, greenhouse/landscape staff)

Do you have previous related volunteer experience? YES ___ NO ___

If yes, what type of setting? (For example: library, school, YMCA, church, civic group)

HOBBIES/INTERESTS:

Area of service preferred:

- ___ Parks/General ___ Parks/Greenhouse ___ Office
- ___ Trail Maintenance ___ Trail Watch ___ Special Events

Emergency Contact:

NAME: _____ RELATION: _____ PHONE: _____ PHONE: _____



Hot Springs Parks and Trails Volunteer Application

REFERENCES (For example: teachers, supervisors, co-workers, neighbors. No relatives please.)

***Please let your references know that Parks and Trails may be contacting them.**

Name: _____

Phone: _____

Title/Position/Relationship to you: _____

Name: _____

Phone: _____

Title/Position/Relationship to you: _____

AVAILABILITY:

___ Mornings

___ Afternoons

___ Weekends

___ Weekly

___ Monthly

___ Special Events

___ Other

Preferred Days: S M T W TH F S

Briefly explain why you are interested in volunteering with Hot Springs Parks and Trails:

Questions or Comments about the Volunteer Program:

Please return to Hot Springs Parks and Trails located at 111 Opera St. Hot Springs, AR 71901

Email: parktrl@cityhs.net

Fax: (501) 321-6813

