



# Volunteer Application

## Contact Information: (PLEASE PRINT)

Name \_\_\_\_\_ Birth Day \_\_\_\_\_ M/F

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

Zip Code: \_\_\_\_\_ Email: \_\_\_\_\_

Employer \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Emergency Contact; \_\_\_\_\_ Phone: \_\_\_\_\_

Relationship: \_\_\_\_\_

### References:

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Phone: \_\_\_\_\_

Your Shirt Size \_\_\_\_\_

Program Information: Why Do You want to Volunteer?

\_\_\_\_\_  
\_\_\_\_\_

Do you feel comfortable assisting seniors in and out of the trishaws? Yes No

Do you have a cell phone to use in case of an emergency? Yes No

Are you willing to carrying and using pepper spray in case of a wildlife encounter? Yes No

Do you have experience with bicycle maintenance? Yes No

I understand all volunteers must undergo a background check and agree to that.

Signature: \_\_\_\_\_ Dated \_\_\_\_\_