



VIRGINIA RECREATIONAL FACILITIES AUTHORITY

Volunteer Application

Full Name: _____ Nickname: _____

If under 18 years of age, birth date: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Phone Numbers:

Day _____ Evening _____ Cell _____

E-mail address: _____

Emergency Contact:

Name: _____ Relation _____

Address: _____

Phone Numbers: _____

Availability (Days and Hours): _____

In what volunteer position are you interested? (office, events, field work, fundraising, construction, maintenance, marketing, education, etc) _____

Special Skills or Qualifications: _____

Any special needs or restrictions we should be aware of? _____

Why do you want to be a volunteer at Explore Park? _____

Criminal History: (Volunteer positions may require a Criminal History check. Convictions will not necessarily disqualify you from participating.)

Have you ever been convicted of a felony? _____

If yes, explain. _____

References:

1. Name: _____ Phone: _____

2. Name: _____ Phone: _____

3. Name: _____ Phone: _____

Signature of Applicant

Date

Signature of Parent (if applicant is under age 18)

Date

Thank you for your interest in Virginia's Explore Park!

Please return app to:
Explore Park
Volunteer Coordinator
1505 Shorevue Circle
Hardy VA 241001
540-890-2195; 540-520-4838