

# Village of The Hills Volunteer Application

## Contact Information

Name
Street Address
City, State, Zip
Home Phone
Work Phone
E-Mail Address

## Availability

*During which hours are you available for volunteer assignments?*

<input type="checkbox"/> Weekday mornings	<input type="checkbox"/> Weekend mornings
<input type="checkbox"/> Weekday afternoons	<input type="checkbox"/> Weekend afternoons
<input type="checkbox"/> Weekday evenings	<input type="checkbox"/> Weekend evenings

## Interests

*Tell us in which areas you are interested in volunteering*

<input type="checkbox"/> Events
<input type="checkbox"/> Fundraising
<input type="checkbox"/> Youth Advisory Commission
<input type="checkbox"/> Parks and Recreation Commission
<input type="checkbox"/> Other

## 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.*

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### Previous Volunteer Experience

Summarize your previous volunteer experience.

### Person to Notify in Case of Emergency

Name
Street Address
City, State, Zip
Home Phone
Work Phone
E-Mail Address

### Agreement and Signature

*By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as a volunteer, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal.*

Name (Printed)
Signature
Date

### Our Policy

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

*Thank you for completing this application form and your interest in volunteering with us.*

Please return the completed form to [citysecretary@thehillstx.gov](mailto:citysecretary@thehillstx.gov)