

**GREATER ONEIDA "KALLET" CIVIC CENTER
VOLUNTEER APPLICATION**

NAME: _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE: Home: _____ Work: _____ Cell: _____

Emergency Contact: _____ Phone: _____

Do you have health limitations ? If yes, what? _____

Special Training or Certification you have (Check all that apply)

- | | | |
|---|-------------------------------------|--|
| <input type="checkbox"/> Driver's License | <input type="checkbox"/> Teaching | <input type="checkbox"/> Fund Raising |
| <input type="checkbox"/> office machines | <input type="checkbox"/> Computers | <input type="checkbox"/> Security |
| <input type="checkbox"/> publicity | <input type="checkbox"/> bar tender | <input type="checkbox"/> First Aid (CPR) |
| <input type="checkbox"/> RN/MD | <input type="checkbox"/> EMT | |

Please check the position you are willing to do as a volunteer:

- Cleanup office volunteer concession tickets greeter
- floater setup events takedown events
- work on a committee anywhere you need me

Time you would like to volunteer _____

Time I am not available or prefer not to work _____
