Volunteer Application for Hudson Crossing Park

Contact Information

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<thead>
<tr>
<th>Name</th>
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<tbody>
<tr>
<td>Street Address</td>
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<tr>
<td>City, Street, Zip</td>
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<tr>
<td>Home Phone</td>
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<td>Cell Phone</td>
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<tr>
<td>E-Mail Address</td>
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Availability

During which hours are you available for volunteer assignments?

___Weekday mornings  ___Weekend mornings
___Weekday afternoons ___Weekend afternoons
___Weekday evenings   ___Weekend evenings

Interests

Tell us in which areas you are interested in volunteering:

___Events
___Planning
___Garden/Grounds work
___Fundraising
___Mailing Assembly
___Outreach
___Other (please explain in space to the right)
Special Skills or Qualifications
Summarize special skills and qualifications you have acquired from employment, previous volunteer work, or through other activities, including hobbies or interests.

Previous Volunteer Experience
Summarize your previous volunteer experience.

Tell us more!
Why are you excited to volunteer with Hudson Crossing Park? How did you find us?

Agreement and Signature

| Name (printed) |  |
| Signature |  |
| Date |  |

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.

Hudson Crossing Park’s Policy
It is the policy of this organization to provide equal opportunities without regard to race, color, religion, nationality, gender, sexual preference, age, or disability. Learn more at www.hudsoncrossingpark.org.

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