THE TOWN OF LARKSPUR

VOLUNTEER APPLICATION

Date of Application_____

Name_____

Address_____
City State Zip

Daytime Phone_____ Evening Phone_____ Fax_____

Email Address_____

Emergency Contact_____
Name Phone# Relationship

Employer_____Title_____Current_____Former_____

Areas of Expertise_____

Personal Skills, Interest or Hobbies_____
_____

How would you like to assist the Town of Larkspur?

Recreation, Parks and Trails
_____Maintenance Crew _____Planning _____ Trail Building _____Special Events
_____Cleanup _____Ball Field Maintenance

Town Hall, Maintenance Yard/Waste Facilities/Road Crew
_____Office Work _____Marketing _____ Fundraising _____Economic Development
_____Renaissance Festival _____ Maintenance Repairs _____ Snow Removal

Volunteer Placement Are there any limitations that we should be aware of that will assist us with your placement?_____

Please indicate hours generally available.

	Sunday	***Monday***	***Tuesday***	***Wednesday***	***Thursday***	***Friday***	***Saturday***
Morning							
Afternoon							
Evening							
Flexible							

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