

## Springfield Preservation Trust Volunteer Form

Date of Application: \_\_\_\_\_ Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Allergies: \_\_\_\_\_

### Emergency Contact

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address \_\_\_\_\_

Days and Times of availability:

\_\_\_\_\_

Projects: please select all that interest you

actor for cemetery tours, tour guide, docent for House Tours, fundraiser assistant, scanning assistant

\_\_\_\_\_  
\_\_\_\_\_

Experience (write your skills or select from these options): customer service, public speaking, interpersonal, and planning skills

\_\_\_\_\_  
\_\_\_\_\_

**Equal Opportunity Statement:** the SPT does not discriminate against any volunteer applicant because of race, sex, sexual orientation, nationality, age, religion, or disability.

I wish to apply for a volunteer position at the SPT. If accepted, I acknowledge my responsibility to adhere to the policies of and to make a commitment to conscientious performance of my duties.

\_\_\_\_\_ Signature of Applicant

I certify that answers given herein are true and complete to the best of my knowledge. As a volunteer of SPT, I understand that false misleading information given in my application may result in dismissal. I understand, also,

that I must abide by all of the rules and regulations of SPT as orally or virtually indicated during my volunteer experience.

\_\_\_\_\_ Signature of Applicant