



# Volunteer Application

## Monmouth County Park System

805 Newman Springs Road, Lincroft, NJ 07738-1695

732-842-4000 ext. 4283

www.monmouthcountyparks.com

### PLEASE PRINT

Name \_\_\_\_\_

*Last*

*First*

*Middle Initial*

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell \_\_\_\_\_ Work \_\_\_\_\_

Email \_\_\_\_\_

Date of birth if under age 18 \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Phone \_\_\_\_\_

School or Group \_\_\_\_\_

Please indicate your area(s) of interest:

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Arts & Crafts              | <input type="checkbox"/> Monmouth County Fair  | <input type="checkbox"/> Sports & Fitness        |
| <input type="checkbox"/> Beach Clean-ups            | <input type="checkbox"/> Nature Interpretation | <input type="checkbox"/> SPUR Equestrian Program |
| <input type="checkbox"/> Beach Nesting Bird Monitor | <input type="checkbox"/> Office Help           | <input type="checkbox"/> Therapeutic Recreation  |
| <input type="checkbox"/> Docent/Receptionist        | <input type="checkbox"/> Outdoor Adventures    | <input type="checkbox"/> Trails Maintenance      |
| <input type="checkbox"/> Friends for the Parks      | <input type="checkbox"/> Park Clean-ups        | <input type="checkbox"/> Trip Leader             |
| <input type="checkbox"/> Gardening/Pruning          | <input type="checkbox"/> Race Attendant        | <input type="checkbox"/> Other _____             |
| <input type="checkbox"/> Invasive Plant Removal     | <input type="checkbox"/> Special Events        |  |

List any special training or skills \_\_\_\_\_

If a reasonable accommodation is necessary, please describe what steps would be needed:

\_\_\_\_\_

Have you ever been convicted of a crime? \_\_\_\_\_ Yes \_\_\_\_\_ No If yes, please describe.

Where \_\_\_\_\_ When \_\_\_\_\_ Disposition \_\_\_\_\_

I HEARBY AUTHORIZE the release of the information listed herein concerning me to the Monmouth County Park System and absolve the Park System from liability for use of same. I HEREBY DECLARE the information provided by me to be true, correct and complete. In addition, I authorize the County of Monmouth and the Monmouth County Park System to obtain background information concerning my driving and personal record and release the County of Monmouth and the Monmouth County Park System from any liability regarding the use of this information. I do this willingly, knowingly and as a voluntary act.

Signature \_\_\_\_\_ Date \_\_\_\_\_

If under 18 years of age, signature of parent or guardian. \_\_\_\_\_ Date \_\_\_\_\_