

MUSKEGON SUMMER



Volunteer Sign Up Form

First Name _____

Last Name _____

Address _____

City/State/Zip Code _____

Cell Phone _____

Email _____

Emergency Contact _____

Date of Birth _____

Tell us about yourself:

Do you have any experience volunteering? If yes, tell us.

Occupation _____

Why are you interested in this opportunity?

How did you hear about this event?

What do you like to do for fun?

How would you describe yourself?

